

Leopold Kyokushin Karate Club Membership Application

I hereby apply for membership of the Leopold Kyokushin Karate Club Inc (Dojo)

I agree to abide by any rules or regulations implemented by the dojo and my mode of behaviour will be guided by the Dojo Kun (see below)

Name: _____ Date of birth: _____

Address: _____

Mobile Number: _____

Email address: _____

Emergency contact name and mobile: _____

Have you had any previous experience in karate or other martial art? _____

If so, please provide details _____

Do you have any physical or mental disabilities? _____

Annual Membership for all who train: \$20 per person

Plus fees as listed:

	Children	Adults	Families (2 or more students)
Month	\$30	\$40	\$50
Term	\$80	\$90	\$100
Yearly	\$280	\$300	\$400

Leopold Kyokushin Karate Club banking details: BSB 633-000 Account 123130940

I hereby acknowledge that neither the Leopold Kyokushin Karate Club, or any of its officials, employees or instructors will be liable or responsible in any way for any injury, accident or loss of life suffered by me as a result of practicing karate or any other form or sport or exercise. Whether such injury of accident was sustained on the premises of the Leopold Kyokushin Karate dojo or elsewhere.

Student's signature: _____

If under 18 years of age, parent or Guardian to countersign.

Parent or Guardian's Name: _____

Signature: _____ Date of signature: _____

Dojo Kun

We will train our hearts and body for a firm unshaken spirit
We will pursue the true meaning of the martial way, so that in time our senses may be alert
With true vigor we will seek to cultivate a spirit of self-denial
We will observe the rules of courtesy, respect our superiors and refrain from violence
We will follow our religious principles and never forget the true virtue of humility
We will look upwards to wisdom and strength, not seeking other desires
All our lives through the discipline of karate, we will seek to fulfil the true meaning of the Kyokushin way