

Wado International Karate Do Federation Northern Ireland (NI-WIKF)



WIKE

without giving a reason.

Licence Application / Renewal Form

The WIKF Licence is a very important document, which has several functions and provides certain benefits to the holder. These are listed as follows:

- 1. A licence will only be issued to members of affiliated NI-WIKF clubs.
- 2. It provides personal insurance cover against injury whilst practising Karate.
- 3. It is mandatory for grading.
- 4. It is an official grading record.
- 5. It is required for participation in all competitions.

• Remember that YOU are responsible for keeping your licence up to date. You cannot grade, compete or claim Accident Insurance if your licence is out of date.

	,		For Official Use	Only	
FEES:	-		Fee Received		
1. 2.	Fees are payable annually. Seniors – 16 years of age and over	 	No. of Licence		
۷.	First Application £ 60.00				
	Renewal £ 40.00	\Box	Date		
3.	Juniors –up to 16 th birthday		Receiving Officer		
	First Application £ 50.00				
	Renewal £ 30.00				
4.	Family rate –3 children or more (U16's)				
	First Application £100.00 Renewal £ 60.00				
Mak	e cheques and postal orders payable to NI-WIKF.				
	TO BE COMPLETED	IN RI	OCK CADITALS		
Surnan	neMr/Mrs/Miss		s WIKF Licence No. (if any)		
	mes)ate		
	S	Grade	Date Pas	sed	
			f Examiner		
			ade Certificate No		
	ode				
Telephone No			Grade from any other association		
Date of	f Birth		•		
Name o	of WIKF Club	Style			
		, · - · · · ·			
Name of	of club Instructor(s)				
Please i	issue me with an annual NI-WIKF Licence				
The fee	of £ is enclosed				
I enclos					
	the appropriate fee				
	current or expired licence (if applicable)	/: f		. t	
Declara	self addressed and stamp addressed envelo	pe (II not i	included the licence may not be re	eturnea)	
	that to the best of my knowledge and belief the foregoir	ng details	are correct an in the event of being	ng accepted I	
underta	ke to abide by the constitution and byelaws of the NI-W	IKF.	are correct air in the event of son	ig doooptod i	
Signatu	reDate				
Signatu	re of parent or guardian if applicant is below 18 years o	f age			
		•			
	oplications to:- Mr. Campbell Corbett, 50 Ardvanage and allow at least 28 days for administration and receipt of the second seco				

Please complete in capitals Using black ink

proposal for registration with the NIKB.

Chairman: Reply To: Application for registration **Training History** Name: Address: Address: Phone: Association Licence No. _____ Previous Mac Licence: Yes / No Number: ______ Name of Association: Wado International Karate Federation N.I. Style: Wado Ryu Applicants Grade: _____ Applicants Coach: _____ Grade Held: **Medical Statement** Do you suffer from any of the following disorders (tick) (i) Migraine □ Epilepsy □ Hay Fever □ Nervous Disorder □ Heart Disorders Abnormal Blood Pressure Do you suffer from any other known medical condition which may make it unsafe to (ii) practice Karate Do you have any disability or impairment_____ (iii) **Declaration** I apply to be registered with the NIKB. I agree to be bound by its constitution, rules and regulations as may be in force from time to time. I declare the information given is true to the best of my knowledge. Date: (to be signed by applicants parent / guardian if applicant is under 18 years old). I confirm that the above named is a Bona Fide karate practitioner, and I second his / her

Signed: _____(coach) Date: ____