



# INTERNATIONAL BUDO FEDERATION (UK) LTD.

## APPLICATION FOR REGISTRATION AND MEMBERSHIP

ON COMPLETION OF THIS FORM I/WE UNDERSTAND THAT THE INFORMATION PROVIDED WILL ONLY BE USED FOR MEMBERSHIP REFERENCE OR IF ON THE UNLIKELY EVENT THAT AN INSURANCE CLAIM IS REQUIRED TO BE MADE OTHERWISE THE INFORMATION PROVIDED WILL NOT BE DISCLOSED TO ANY OTHER PARTIES OUTSIDE OF THE INTERNATIONAL BUDO FEDERATION GREAT BRITAIN.

IF YOUR IBF BUDO PASS IS NOT STAMPED OR SIGNED BY THE SECRETARY OF THE IBF GB AS A CURRENT MEMBER OF THE INTERNATIONAL BUDO FEDERATION GREAT BRITAIN THEN YOUR GRADE IS NO LONGER VALID OR RECOGNISED. FAILURE TO PAY YOUR YEARLY MEMBERSHIP WILL MEAN IF YOU PAY FOR A FOLLOWING YEAR THEN YOU WILL BE REQUIRED TO PAY THE PREVIOUS YEAR ALSO TO MAINTAIN YOUR GRADE VALIDITY.

BEING A MEMBER OF THE INTERNATIONAL BUDO FEDERATION GREAT BRITAIN ENTITLES YOU TO HALF PRICE FEES TO ALL INTERNATIONAL BUDO FEDERATION GREAT BRITAIN SEMINARS AND YOUR GRADE RECOGNISED IN OVER 30 DIFFERENT COUNTRIES.

PLEASE NOTE THAT ANY MEDICAL CONDITIONS THAT MAY AFFECT YOUR PARTICIPATION IN MARTIAL ARTS MUST BE DISCLOSED TO THE INTERNATIONAL BUDO FEDERATION GREAT BRITAIN FOR HEALTH AND SAFETY REASONS.

**YOU MUST COMPLETE THE BELOW INFORMATION IN BLOCK CAPITALS AND COMPLETE ALL SECTIONS!**

SURNAME: \_\_\_\_\_ FORENAME(S): \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE NUMBER \_\_\_\_\_ EMAIL: \_\_\_\_\_

IF YOU DO HAVE ANY MEDICAL CONDITIONS PLEASE LIST THEM HERE: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

NEXT OF KIN NAME \_\_\_\_\_ TELEPHONE NUMBER \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_/\_\_\_/\_\_\_

*PARENT/GUARDIAN IF UNDER 16*

**THIS IS A YEARLY REQUIREMENT TO MAINTAIN VALIDITY FOR YOUR GRADE AND YEARLY STAMPED MEMBERSHIP WITH THE IBF GREAT BRITAIN**

**BY SIGNING THIS APPLICATION FORM, YOU ARE ACKNOWLEDGING THAT YOU AGREE TO THE TERMS AND CONDITIONS DECLARED AND LISTED ABOVE**