

# I.B.A. - INTERNATIONAL BUDO ASSOCIATION



**UK Applications only**

APPLICATION FOR NEW LICENCE  
AND INSURANCE OR RENEWAL  
**FOR INSURANCE PURPOSES THIS FORM MUST  
NOT BE ALTERED IN ANY WAY**  
GRADINGS MUST NOT BE CARRIED OUT ON  
STUDENTS WITH OUT-OF-DATE LICENCE

**JOSH JOHNSON (HANSHI) - 9<sup>th</sup> Dan Hanshi**  
IBA President & Licensing Officer  
Wakefield Karate and Martial Arts College  
5 Valentine Mews, Lofthouse, Wakefield,  
West Yorkshire, WF3 3NB

Office: 01924 386499  
Mobile: 07930 225525

**TO BE COMPLETED IN FULL USING BLOCK CAPITAL LETTERS ONLY**

Surname \_\_\_\_\_ First Names \_\_\_\_\_  
Address \_\_\_\_\_

Post Code \_\_\_\_\_ Date of Birth \_\_\_\_\_ (DD/MM/YY)

Previous Membership N<sup>o</sup> \_\_\_\_\_ Expiry Date \_\_\_\_\_ (DD/MM/YY)

Club \_\_\_\_\_ Area \_\_\_\_\_  
Style \_\_\_\_\_ Name of Your Instructor \_\_\_\_\_

Grade:  Mon }  
(tick)  Kyu }  
Dan  (enter) }  
Ungraded  }  
Level:  (1<sup>st</sup> to 10<sup>th</sup>) Male/Female \_\_\_\_\_

Ethnic Origin: Caucasian- Black Caribbean- Black African- Black other- Indian-  
Pakistani- Bangladeshi- Chinese- Other Non-white- Other- (state)  
\_\_\_\_\_ (Information required by KARATE ENGLAND for funding purposes)

Have you ever been convicted on a charge of violence? No  Yes

Have you any medical condition which may affect your training? No  Yes

Have you any type of disability? No  Yes

Details for any "YES" above: \_\_\_\_\_

Please circle any of the following conditions you may suffer from:  
Haemophilia / Hepatitis / HIV / AIDS / Blood Disorders / Epilepsy / Diabetes / Heart Disorders /  
Nervous System Disorders / Psychological Disorders / Respiratory Disorders (e.g. asthma, hay  
fever, etc) / Any other (state) \_\_\_\_\_

**SUBSCRIPTION RATES: please tick the appropriate box**

SENIOR NEW - £14.00  JUNIOR NEW - £12.00

SENIOR RENEWAL - £10.00  JUNIOR RENEWAL - £10.00  
AGED 16 YEARS OLD AND OVER AGED 5 TO 15 YEARS INCLUSIVE

**SEND CHEQUES OR POSTAL ORDERS ONLY MADE PAYABLE TO:**

**THE INTERNATIONAL BUDO ASSOCIATION**

NEW APPLICATIONS: FEE INCLUDES LICENCE & INSURANCE

**DO NOT SEND EXISTING LICENCES WITH THE APPLICATION IF RENEWING**

**DECLARATION TO BE COMPLETED BY THE APPLICANT**

- 1: I accept that training in the Martial Arts may involve the risk of injury
- 2: I clearly understand that the practice of Martial Arts is entirely at my own risk
- 3: If accepted by the Association, I undertake to abide by the rules and articles of the I.B.A. together with any amendments that may be made during my period of membership

Signed \_\_\_\_\_ Date: \_\_\_\_\_

(To Be Signed By Parent or Guardian If Under 16 Years Of Age)

**SEND ALL COMPLETED FORMS WITH FEE TO ADDRESS AT TOP OF PAGE**

e-mail- [josh.johnson@tiscali.co.uk](mailto:josh.johnson@tiscali.co.uk) Websites: [www.wakefield-karate-college.co.uk](http://www.wakefield-karate-college.co.uk),

Or : [mail4iba@tiscali.co.uk](mailto:mail4iba@tiscali.co.uk) [www.wkc-martial-arts-supplies.co.uk](http://www.wkc-martial-arts-supplies.co.uk)

OFFICIAL I.B.A. Web Site : <http://www.iba.eu.com/>

