

**AIKIDO FOR DAILY LIFE**

Membership Application Form

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| **CLUB NAME:** | **Rusper Aikido Club** | |
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| Name: | | DOB/Age: |
| Address: | | |
| Telephone No: |  | |
| Email Address: |  | |

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| --- | --- |
| Have you ever practiced martial arts before? | YES / NO |
| If yes, please give details of style, affiliation and grade and date of grading: | |

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| --- | --- |
| Have you any ailments? | YES / NO |
| If yes, please give details: | |

|  |  |
| --- | --- |
| Emergency contact and relationship: |  |
| Emergency contact’s telephone number: |  |

Adult Concession Child

Fee due (see scale overleaf) £\_\_\_\_\_\_\_\_\_\_\_\_

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| Type of Insurance required: | Teacher/Teaching Assistant/Student |

**MEMBERSHIP**

Adult Rate: £28

Concessionary Rate (e.g. aged under 18, aged 65+): £16

The membership year runs from 1st September to the end of August. For students joining after October, the annual subscription is prorated based on the remaining months in the year:

November to August less 25%

September to August less 50%

December to August less 75% **plus** 2022/23

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| **Insurance Period** | **Adult Rates** | **Concessionary Rates** |
| 1 September-31 August | £28.00 | £16.00 |
| 1 November-31 August | £21.00 | £12.00 |
| 1 March-31 August | £14.00 | £8.00 |
| 1 June 2022-31 August 2023 | £35.00 | £20.00 |

As part of your membership of Aikido for Daily Life, you will automatically also become a member of the British Aikido Board, the principal governing body of aikido in the UK. The cost for this is £7 and includes a compulsory indemnity insurance which entitles the student to three introductory classes is to be paid before a student is allowed to practise. This insurance will also provide cover for the remainder of the membership year, expiring at the end of the following February. The fee is **included** in the membership rates noted below.

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| **Please pay your fee(s) to the account detailed below making sure that you use your name as a payment reference:** | |
| **Account Name:** | **Aikido for Daily Life Association** |
| **Sort Code:** | **09-01-55** |
| **Account Number:** | **89845187** |

**DATA PROTECTION AND CONFIDENTIALITY**

The data collected on this form will be used for the following purposes:

1. Application for membership of Aikido for Daily Life (ADL) inclusive of membership of the BAB membership with compulsory insurance.

2. Email and/or social media communication to, for example, promoting ADL events

3. Email distribution of the BAB newsletter (undertaken by the BAB)

4. Emergency contact details

It is a requirement of the Data Protection Act 1998/2018 that persons give their written authorisation to have their details recorded. By signing below, you are allowing your personal details to be recorded on the Aikido for Daily Life (ADL) and the British Aikido Board (BAB) databases. The basis on which your Club, ADL and the BAB processes your personal data is their legitimate interest in the following: administration purposes in managing a sports club/association, maintaining accurate membership records, safeguarding of members, obtaining insurance through BAB membership, informing members of news and information about the BAB and Aikido in general. The BAB is the only third party with whom ADL share any of your personal data. ADL will provide the BAB with your personal details when first applying for, or renewing, your BAB membership and other details in instances where it is necessary for the BAB’s functioning as a national governing body.

You have the right to request a copy of your personal data and other rights such as erasure or correction of your personal data, as well as the right to make a complaint to the Information Commissioners Office. For further details see the BAB Data Protection Policy which is available at [www.bab.org.uk](http://www.bab.org.uk). The policies also summarise the approach to retention of personal data.

If you have further queries, the BAB has a Data Protection officer who can be contacted at the following email address: [dpo@bab.org.uk](mailto:dpo@bab.org.uk)

Under the terms of the Data Protection Act, you confirm that:

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| --- | --- |
| I am aware of my/our rights under the General Data Protection Regulation (GDPR) and have given my express consent to be contacted in relation my/our Aikido related activities | YES / NO |
| I have given consent for you to hold my/our personal data and to share it with the British Aikido Board | YES / NO |
| I am aware that I have the right of access to information that Aikido for Daily Life holds on me/us. I also have the right to request that personal data held on me/us is rectified or erased, or object to processing as well as the right to portability | YES / NO |
| I agree for you to use the provided information to keep me up-to-date with details of Aikido related news, courses and similar activities via email, social media and other telecommunications | YES / NO |

**Failure to sign below will mean you cannot be a member of these Associations. For persons under the age of 18 please ensure a parent or legal guardian signs on your behalf.**

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| Signature: |
| Date: |

Notes on the completion of the Membership Form

1. You are reminded that, although your Club will take all reasonable care to minimise the risk of injuries to its students, such injuries may occur. Please remember that Aikido is a Martial Art and is therefore classified as a contact sport.
2. Students agree that they participate entirely at their own risk and to attach no responsibility whatsoever to the Association, its officers, clubs or instructors for any injury, accident, loss or damage suffered and to act with all due care to safeguard their safety and that of fellow students.
3. Please write clearly (print in CAPITALS).
4. The "Date of Birth" must be supplied if the student is under the age of 18.
5. "Emergency Contact Name" and "Emergency Contact’s telephone number" fields are required for health and safety purposes. Instructors have a duty of care to their students and this information will only be used in emergencies. In cases where you are under the age of 18, such details must be those of the parent or legal guardian signing the form.
6. "Ailments" consist of injuries or illnesses, long-term and/or recent, that may affect your ability to practice; that may require specialist attention from the Instructor; or may affect the issuing of insurance.
7. Any queries, in the first instance, must be directed to your Instructor or your Club's nominated representative.
8. For details of the insurance cover you will receive on payment of your fee, please visit the BAB’s website: [www.bab.org.uk](http://www.bab.org.uk) .