

Annual Member Application for Membership

Last name:
First name:
Address:
Phone:
Email (req'd): Please print clearly
Gender: Male Female
Date of Birth:/ Year/Month/Day
Current rank (kyu/dan):
Youth Adult
Waiver: I, the above named person, hereby apply for membership in NWT Karate Association. If this application is accepted, I agree to abide by Constitution, Bylaws, Regulations, Rules, Codes and Guidelines of NWT Karate Association. In consideration of your acceptance of my application fees, I hereby for myself, my heirs, executors, administrators and assigns(hereinafter referred to as the "Applicant") do hereby remise, release and forever discharge NWT Karate Association, their heirs, assigns, officers, representatives, agents, employees and members, sponsoring organizations, and owners of properties on which NWT Karate Association sanctioned events are held or to be held of all manner of actions, claims or demands against NWT Karate Association.
Photo/Video Release : By participating in NWT Karate Association activities, I hereby consent to having any picture or video image taken of me and/or my child (under age 18) during any NWT Karate Association activity in any edited material used for NWT Karate Association promotional activities, Website and souvenir videos. I also accept that NWT Karate Association use any photomontage and videotape in which I appear for television purposes.
Additional Consent: To comply with this new anti-spam law NWT Karate Association is required to obtain your consent in order to send you e-communications from our Organization. This may include newsletters, announcements, invitations and other news or information. Privacy Note: NWT Karate Association will only use your personal information for maintaining your membership and access to our programs and the programs of Karate Canada. Your information will not be sold or provided to other organizations.
Agreement to adhere to the MEMBER RIGHTS, CONDUCT, DISCIPLINE, DISPUTES, AND APPEALS POLICIES AND PROCEDURES as an athlete, participant, student, instructor, coach, official or volunteer.
Signature of Applicant:
Date:
Signature of Parent/Guardian:
Date:
(If applicant is under 18)
NAME OF DOJO:
NAME OF DOJO INSTRUCTOR:
DOJO HEAD SIGNATURE:
REGISTRATION FEE: \$30.00
FOR NWTKA USE ONLY: DATE RECEIVED:NWTKA MEMBERSHIP DIRECTOR SIGNATURE: