

SCHOOLS LICENCE APPLICATION FORM

BRITISH JUDO ASSOCIATION, SUITE B, LOUGHBOROUGH TECHNOLOGY CENTRE, EPINAL WAY, LOUGHBOROUGH, LE11 3GE Tel: 01509 631670 Fax:01509 631680



Complete the application in block capitals ensuring that you sign where indicated.

SCHOOLS LICENCE	Surname	First Names	Date Of Birth	Male	Female	
	Ethnic Group	Disability				
Address						
				Postcode		
	School Name			BJA Club linked to		
ENJOY-JUDO SCHOOLS JUNIOR LICENCE -18 years / issued for four months / valid for all Enjoy-Judo activities					£5.00 Cheques payable to the British Judo Association	

ETHNIC GROUP - Please choose the category that best describes your ethnic group from the following list. Enter the code (and write in other description where appropriate) on your application.

A1. British	A2. Irish	A.3 Any other White background (please write in)	
B1. White and Black Caribbean	B2. White and Black African	B3. White and Asian	B4. Any other Mixed background (please write in)
C1. Indian	C2. Pakistani	C3. Bangladeshi	C4. Any other Asian background (please write in)
D1. Caribbean	D2. African	D3. Any other Black background (please write in)	
E1. Chinese	E2. Any Other background (please write in)		

DISABILITY - The Disability Discrimination Act 1995 defines a disabled person as anyone with a "physical or mental impairment that has a substantial and long term adverse effect upon his/her ability to carry out normal day to day activities. If you consider yourself to have a disability, please choose the description that best describes the nature of your disability and enter the code (and write in other description where appropriate) on your application.

A. Visually Impaired	B. Hearing Impaired	C. Physical Disability
D. Learning Disability	E. Multiple Disability	F. Other (please write in)

DECLARATION I certify that to the best of my knowledge and belief, the information given in this application is correct. If accepted as a licence holder of the British Judo Association, I agree to abide by the Articles of Association and Bye-Laws together with any amendments made during the term of my licence and to comply with doping control procedures.

It is a criterion that all clubs, regions and affiliated bodies require staff, coaches, officials, administrators, parents and participants adopt and abide by the British Judo Association's Child Protection Policy and Procedures. The document is published on the BJA web site. Hard copies can be obtained from BJA Head Office.

Enclose payment with completed application form and forward to the British Judo Association, Suite B, Loughborough Technology Centre, Epinal way, Loughborough, LE11 3GE. Cheques and postal orders payable to British Judo Association.

Please complete the following section for payment by credit or debit card:

Credit / Debit Card Number			
Card Expiry Date		Issue Number (Switch Users Only)	
Signed			Date
Applicant if over 18 years / Parent or Guardian if under 18 years			
If Parent or Guardian print name			Relationship to Applicant
The British Judo Association is registered under the terms of the Data Protection Act and wishes to include the information you have provided on this application on the BJA database for the purpose of administration and maintenance of membership records, provision and administration of activities, support and fund raising. Please complete the following section to indicate your consent to this process.			
I consent to the information on this application being included on the BJA database			
Signed			Date