

## MEMBERSHIP FORM

Name			
Felixstowe Judo Club Membership Type	Adult		
	Junior		
	Student/NHS/Forces		
		Family*	
* Head of Family			
Start Date			

## **British Judo Association**

British Judo Association Membership Type	Introductory	Recreation	
	Adult	Student/NHS/Forces	
	Junior	Judo Kids	
Membership Number			
Expiry/Renewal Date			
Syllabus and Grade			
Additional BJA Qualifications			

I agree to abide by the rules and regulations of the Club. I also declare that I will be respectful of other members at all times and will participate in the true spirit of Judo.

Signed	
Date	

