

Photography/Filming

Do you agree to you/your child being photographed and filmed at Shogun AMA training and events? (These images are used for recording progress, teaching and promoting the club, for example through our website or social media).

Yes / No

In line with our Child Protection Policy, if your child (named as the applicant) is under 16 yrs and agrees to this, they must also sign below.

Child's signature:

Communication Preferences

How would you like to receive communication from Shogun AMA regarding your membership and day to day training and events:

Email / Phone / Text

Would you like to receive, **via email**, promotional/marketing information from Shogun AMA regarding our products and events?

Yes / No

Confirmation

By signing this form, you confirm that you would like to apply for membership of Shogun AMA and your instructor has explained to you the training methods used in Martial Arts. You accept that the practice of Martial Arts involves the risk of serious injury.

(Parent/Guardian signature required if applicant under 16 yrs. old).

Applicant (Parent/Guardian) Signature:

Print Name:

Date:

Privacy Information

Your privacy is important to us. We take information from you to enable us to provide you quality membership of Shogun AMA. Your data is stored safely and securely – the data on this form will be uploaded onto our secure electronic database and this form will then be destroyed. Our full Privacy Notice is available to read on our website: www.shogunama.com or from your instructor.

Would you like a copy of our Privacy Notice emailed/posted (delete as applicable) to you?

Yes / No