



Enrolment Form -

Judo 2019

Child's Name & Surname	
School	
Grade <i>Please include class teacher name</i>	
Date of Birth	
Child's ID number (Or passport #) For the purposes of registering him/her with Judo South Africa	
Parent Name & Surname	
Cellphone Number	
Email Address <i>Please PRINT clearly</i>	
Alternative Emergency Contact	Name: _____ Number: _____
Known Medical Conditions <i>Including medication information</i>	

Please read the following information carefully:

- I acknowledge that I have enrolled my child in Judo for the year of 2019 and I acknowledge that *written notice* is required to discontinue Judo tuition.
- It is my responsibility to disclose all relevant medical information to the Judo Coach.
- It is my responsibility to seek medical advice on any condition that might impact my child's ability to participate in Judo
- I recognise that my child is not allowed to participate in any Judo competition without the permission of his/her Judo coach, due to safety concerns.
- Contact Details: **Jason Milbank: 071 990 7945** or **jason_judo@yahoo.com**

I, _____ (Parent/ Guardian)

have read, understood and acknowledged the above mentioned conditions of enrolment with Western Province Schools Kodokan Judo. I hereby give my child permission to participate in Judo for 2019.

Signature: _____ Date: _____



Fee Agreement - Judo 2019

- Judo is a private extra mural offered at your child's school, at an additional cost per term.
- Judo fees are **R750.00** per Term for 2019.
- It is your responsibility to ensure that fees are up to date. If there is a problem, please contact Jason.

Banking Details:

JD Milbank
Standard Bank
Cheque Account
Fish Hoek
Branch Code: 03600980
Account Number: 072070897

**Please use YOUR CHILD'S NAME
as a reference**

**email proof of payment to:
jasonjudo7@gmail.com**

I, _____ (Parent/ Guardian)

have read, understood and acknowledged the above mentioned conditions of enrolment with Western Province Schools Kodokan Judo. I hereby agree to settle Judo fees within the first week of each term. I understand that failure to do so will result in my child being unable to continue with Judo tuition until fees are settled. I have completed the enrolment form.

Signature: _____ Date: _____