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COMMUNITY SPORTS ACADEMY ISLINGTON COMMUNITY SPORTS ACADEMY (ISCA): COMPANY REGISTERED IN ENGLAND & WALES NO: 07844933																												
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BEGINNERS TO COMPETITIVE AMATEUR BOXING (JUNIORS: 8 – 15 yrs. old – SENIORS: 16 – 35 yrs. old) Please complete all the fields below in legible handwriting and mark one character per square, letters in CAPTIALS.																												
<u>First l</u>	Name																		-]		
<u>Surna</u>	ame:																											
Date	of Birt	th:																										
<u>Please Circle</u> Male - Female Senior Academy (16-35 years) - Junior Academy (8-15 years)															5)													
Addre	ess:																											
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<u>Postc</u>	ode:									<u>Te</u>	lepł	none	<u>e:</u> [
Emergency Contact Number: (Must be supplied)												-																
<u>Email</u>	<u>l:</u>		******		******	******			******			*****		******		*****	******		*****				*****		 ******	****	******	******
ISLINGTON COMMUNITY SPORTS ACADEMY – ACADEMY BOXING SECTION 2022 Does the proposed associated member have any serious medical conditions that may affect him/her in participating in boxing training? Yes / No If yes, please supply details.															?													
 I have read and fully understand the rules and regulations of Islington Community Sports Academy (ICSA) that are posted in the club premises and agree to always abide by them. I know that failure to do so could result in my registration being cancelled and may lead to a permanent ban at ICSA and Islington Boxing Club. My signature appears below to clarify this statement. I am also aware that my registration makes me only an associated member of ICSA with no voting rights. As in any other sport in which contact occurs, there can be a risk of injury to the participants. You can be assured that every precaution is taken by the club/coaches to minimise these risks, but you must understand it can happen and is unavoidable, as it is part of the contact that the sport offers. By signing this form, you agree that any injury that occurs due to the nature of the contact sport is entirely at your own risk. I agree that any photography/filming produced by the club or an agreed third party which has been approved by the management of Islington Community Sports Academy and can be used by ICSA/Islington Boxing Club or by those given permission by us for any PR/Media or Social Media content to promote this club's activities. 																												
 I understand that under <u>NO</u> circumstances will there be any refunds on membership fees or pre booked sessions. This registration is for the Academy section <u>only</u> and is <u>not</u> transferable to other section of ICSA, an upgrade fee or dual membership fee may apply for other sections. I understand that the club may need to use my details for reasons of health and safety, I give my consent to this. I understand that membership to the club is for a <u>calendar</u> year only regardless of first date of registration and is due for renewal in January 2023. Please Note: Every applicant/Parent/Guardian must be aware that the Academy section of the club that you/your child is enrolling into is a competitive boxing group. The 																												
training standarc I agree t	lote: Ever does con ds. To rea to the clui rs and sup	tain full ch thes b being	conta e stano able to	act boxi dards w o use m	ing. The vill take ny pers	ese cla e time sonal c	asses a and r letails	are air 10 one for th	ned at will b eir ow	thos e rus n use	e who hed in e only	have to cou and a	the a mpet gree	ambitio ing. We to poss	n to e only ible	go on y allow mailsh	to con v those nots/in	npe e wl 1fori	te for no att matio	the c ain th	lub ir nis lev	touri el, in	name their	ents, if coach	f they r nes' op	reach pinior	h the r n, to co	required ompete.
Signed														Dat	te													
If applicant is Under 17 this section to be completed by Parent/Guardian. If signing for a person under the age of 17, I as the Parent/Guardian, give permission for my child to participate in Full Contact Boxing and is fit to do so in my opinion. If my child partakes in contact boxing it is done completely at his/her own risk. I am aware and accept the clubs Child Protection Policy. A Copy of this is displayed around the club building.																												
Signed														Dat	Γ] [1- 1								· · o ·

Parent/Guardian of applicant (if under 17 years old)