ISLINGTON

COMMUNITY SPORTS ACADEMY

ISLINGTON COMMUNITY SPORTS ACADEMY (ICSA): COMPANY REGISTERED IN ENGLAND & WALES NO: 07844933

INFANTS BOXING CLASSES 2025: 5 - 9 Year Old's

Please complete all fields below in BLOCK CAPITALS marking one character per square.

First Name:

Surname:

Date of Birth: **Male** - **Female**

Address:

Postcode:

****

Name of Parent/Guardian:

Emergency Contact Number: **(Must be supplied for all applicants)**

Email:

****

ISLINGTON COMMUNITY SPORTS ACADEMY - INFANTS BOXING SECTION 2025

Does the proposed associated member have any serious **medical conditions/learning disabilities** that may affect him/her in participating in boxing training? **Yes / No** If yes, please supply details:

****

As the Parent/Guardian of the above, I have read and fully understand the rules and regulations of Islington Community Sports Academy (ICSA) that are posted within the club premises and agree to always abide by them. I know that failure to do so could result in my child's 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 ISCA with no voting rights.

Under **NO** circumstances will there be any refunds on membership, term fees or pre booked sessions. I understand that membership to the club is for a ***calendar*** year only regardless of first date of registration and is up for renewal in January 2026. This registration is only for the 5-9-Year-Old classes and is **not** transferable to the older groups. I am aware and accept the ICSA Child Protection Policy. A copy of this policy is displayed around the club building. I give permission for my child to participate in Boxing Training and is fit to do so.

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 agree to the club being able to use my personal details for their own use only and agree to possible mailshots/information that the club may need to send to their users, members and supporters. This information should be stored under Data Protection rules and not shared to third parties.

I consent that the club can use my details for reasons of health and safety.

Please Note: As the Parent/Guardian of the above applicant, you are aware that the section of the club that your child is enrolling into is a semi-competitive level group. The training does at times contain full contact sparring in our gym or at visiting venues. These classes are there for your child to enjoy and learn the basics of boxing and take this into the higher age group classes when they graduate. As in any other sport in which contact occurs, there can be a risk of injury to the participants. This is the nature of the sport. We often see some tears, but this is mostly due to frustration in many cases. We do not like to see any child upset but it happens in all sports and after a few minutes it is often forgotten. 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.

Signed **Date**

Parent /Guardian