Hello!

We at NKMA would like to welcome you to the club.



As a club who cares about our students, we thought it would be nice to keep an up to date record of our students and we would really appreciate it if you could fill in the following details, please. Your data will not be shared with any other entity, unless permission has been gained or there is a potential safeguarding occurrence that needs to be dealt with.

Thank you

Helen Hawkes Club Secretary

NKMA Student	
Student Name:	
Date of Birth:	
Address:	
Approximate training start date:	
How did you hear about the club:	1
Any medical conditions, including any diagnosed	
or suspected learning difficulties, and information relating to ongoing diagnosis:	
If you do not consent to being photographed or videoed for our social media platforms, you can opt out by selecting this tick box or notifying us by email at kazenkent@mail.com	

FOR OFFICE USE ONLY
Membership Number:
Licence issue date:
Licence expiry date:
Membership payment date: