



Saskatchewan Karate Association

*"The ultimate aim of the art of Karate lies in the perfection of the character of its participants."
- Gichin Funakoshi*

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SKA MEMBERSHIP REGISTRATION

(PLEASE PRINT CLEARLY)

CURRENT DATE: (Month/Day/Year): _____

FIRST NAME: _____ **LAST NAME:** _____

MAILING ADDRESS: _____
(Street / Box #)

(City/Town)

(Province)

(Postal Code)

EMAIL: _____

PHONE NUMBER: _____ **BIRTH DATE:** _____
(Month/Day/Year)

SEX: _____ **DOJO:** _____
(M/F)

PRESENT KYU/DAN RANK: _____ **BELT COLOR:** _____

MEMBERSHIP: First Year _____ Renewal _____
(check one)

REGISTERED WITH KIDSPORT: _____ (Y/N)

ABORIGINAL VOLUNTARY SELF DECLARATION – Please check one most applicable to your ancestry:

Status/Treaty: _____ Non-Status: _____ Métis: _____ Other Under-Represented Population: _____

MEMBER CONSENT: I CONSENT _____ DO NOT CONSENT _____

To use of information, including name, age & photographs to be used by the SKA and affiliated clubs for the following purposes: newsletters, media results/articles, SKA/club websites & SKA & affiliated clubs social media platforms.

NOTE: This consent does not include Pictures/videos from SKA tournaments as pictures & videos from these tournaments may be used for SKA Newsletters/Website or other social media platforms. It is your responsibility to indicate your consent option on the SKA Provincial Tournament Form.

* SKA Privacy Policy can be viewed on our website at: www.saskarate.com

If over 18 years of age: Have you ever been convicted of a criminal offense involving violence? (Y/N) _____

SIGNATURE: _____