

# Club des Artistes Registration Form



Name \_\_\_\_\_  
 (Family) \_\_\_\_\_ (Given) \_\_\_\_\_ (Title) \_\_\_\_\_  
 Address \_\_\_\_\_ Date of Birth (if Under 18) DD/MM/YYYY  
 \_\_\_\_\_  
 \_\_\_\_\_ Contact phone (day)\* \_\_\_\_\_  
 \_\_\_\_\_ Contact phone (night)\* \_\_\_\_\_  
 Post Code \_\_\_\_\_ Contact email\* \_\_\_\_\_  
 (\*details of parent/guardian if fencer is under 18)

How did you hear about us? \_\_\_\_\_

School/College Attended \_\_\_\_\_  
 (Eligibility for certain fencing events is dependant on place of residence OR educational establishment attended) \_\_\_\_\_

Application Type (please tick)	Adult	—	Junior (11-13yrs)	—	Adult Novice	—	Junior Novice (11-13yrs)	—	“Young Zorro”	—
	(experienced Fencers)				(little or no previous experience)				(under 11 yrs)	

British Fencing Membership N<sup>o</sup> \_\_\_\_\_ Weapon(s) Fenced \_\_\_\_\_

Gender (M/F/Other) \_\_\_\_\_ Hand (L/R/Ambi) \_\_\_\_\_ Chest Size \_\_\_\_\_

**Guide to Chest Size**  
 XXL = 50”-56”/127cm-142cm  
 XL = 46”-49”/117cm-125cm  
 L = 42”-45”/107cm-114cm  
 M = 38”-41”/96cm-104cm  
 S = 34”-37”/86cm-94cm  
 XS = <34”/86cm

## Terms & Conditions

1. Temporary membership of CdA will be conferred on those enrolled on any course organised by or on its behalf.
2. Neither CdA, its coaches, instructors nor members shall, in any circumstances whatsoever, be under any liability to the applicant for any loss, damage or injury (including death), whether accidental or otherwise, arising during, or resulting from participation in fencing activities within the Club premises or on the Club's behalf.
3. Membership fees are non-refundable. If you are unable to attend a course in which you are enrolled then, provided notification is received by email (info@cdafencingclub.co.uk) 7 clear days before the date of the first session, we will make a full refund of any fees paid. **NO** refunds will be made once the course has started.
4. Payment may be by cash or cheque (payable to “Club des Artistes”) or by standing order or Bank Transfer to:

Bank/Branch - NatWest Putney, [153 Putney High Street SW15](#)  
 Sort Code - 60 17 11  
 Account Name - Club des Artistes  
 Account Number - 86689134

## **Data Protection/Photography/Videography**

Personal details of applicants may be kept on computer but will not be disclosed to any third party.  
 From time to time photographs or video might be taken to assist in training or for publicity purposes, including Internet publicity. On request or where possible or practical, images will be anonymised before publication.

## **Declaration / Consent**

I have read and understood the above information and agree to abide by the Terms and Conditions as stated.

Signature ..... Date .....

Medical Information	
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This information will remain Confidential and will only be retained for as long as necessary. It is only useful if it is up to date so please advise us promptly of any changes

Next of Kin	
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Relationship to Fencer	
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Emergency Contact details	
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Name of GP and Address of Surgery	
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Telephone Number	
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Please advise us of any medical conditions relevant to exercise and/or fencing, e.g. diabetes, epilepsy, allergies, asthma, sensory problems, migraine, heart conditions, ADHD.

Please also advise us if any medication is taken by you/your child that we might need to know about in an emergency e.g. inhalers, migraine tablets, epilepsy tablets, etc.

**Medical Disclaimer**

Fencing is a contact sport which can involve considerable physical activity. If you have any doubts about your/your child's ability to participate please consult a doctor. If there are any medical issues about which we should be aware (epilepsy, allergies, hearing loss etc.) please provide details below

The information provided above is correct to the best of my knowledge and I undertake to advise the Club of any significant changes as soon as possible. I understand that Fencing is a physical Activity and that Club des Artistes, its coaches, instructors, Members and volunteer helpers shall not be under any liability for any loss, damage or injury (including death), whether accidental or otherwise, arising during or resulting from participation in fencing activities with the Club or on the Club's behalf. I am not aware of any medical condition which might affect my/my child's ability to participate in fencing.

Signature \_\_\_\_\_  
(Parent or guardian if fencer is under 18)

Date \_\_\_\_\_