

School Judo Club Enrolment Form



Your Judo Teacher is Michael Pring:

'Phone: 07973-196409

E-mail address: m.pring@mac.com

Website: www.southernjudokan.co.uk

Please enter your details below:	
Child's Name	
School Year	
Emergency Contact Name (1)	
Relationship to student	
Emergency Contact (1) Phone Number(s)	
Emergency Contact (1) E-mail address	
Emergency Contact Name (2)	
Relationship to student	
Emergency Contact (2) Phone Number(s)	
Any medical information relevant to your child's participation in judo - (if in doubt please seek medical advice).	
Does your child require an inhaler or an epipen?	
Any other information that you would like to share with the judo teacher	

Thank you! Your information will be kept safely and will not be shared.