



Inschrijfformulier

First name:..... Initials:.... Surname:.....
 Address: Zip code:.....
 Date of birth:..... M/F (delete as appropriate)
 Phone: 070-..... 06-..... 06-.....

Email:

Possibly 2the e-mail:

If you've been to judo before, what color band/slip has been achieved?

For children under 18 years

Details of the parent/carer: Details of parent/carer 2:

Name:..... Name:.....

Email:..... Email:.....

Phone. 1: Phone. 2:

Are there any details to report that, in whatever way, can be taken into account during judo practice and judo? (E.g., medication use, medical disabilities, behavior.) No/Yes (delete as appropriate)

.....

Contribution per calendar year is € 240,00 to 17 years / € 300,00 from 17 years. When registering during the calendar year, you pay for the number of remaining months.. This amount includes the contribution for the Judo Bond Nederland. We do not charge a registration fee. We ask you to take care of payment yourself, you will receive a reminder by e-mail. Payment can also be made in 2 instalments, 1 January and 1 May of the calendar year (€ 120,00 or € 150,00 respectively).

The undersigned declares to have filled in these details correctly and to behave in accordance with the letter and spirit of the internal regulations and the protocols against bullying and sexual harassment. These protocols and the internal regulations can be found on the website of Judoclub Paddepad.

Name of parent/carer: (For children under 18 years)

Date:..... Signature:.....

Judo teacher:
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 IBAN: NL47 INGB 0004908926 t.n.v. Judoclub Paddepad, The Hague

Registration form Judoclub Paddepad

