

MEMBERSHIP FORM

Association

Shin Nippon Bujutsu Kenkyū Kai (真日本武術研究会)

ver. 1.3

PERSONAL INFORMATIONS

First name	 Last name	
Birth date		
	 (D-M-Y)	
Street	 	
ZIP	 Town	
Phone	 Mobile	
Email		

I hereby declare that I wish to become a supporting member of the *Shin Nippon Bujutsu Kenkyū Kai association* (真日本武術研究会). This document cancels and replaces any previous agreements relating to membership in the association.

I acknowledge having read the association's purpose as well as the internal regulations which I agree to follow fully. I am informed of my rights and duties as a member and agree to pay the requested monthly contribution in the amount of:

MONTHLY MEMBERSHIP FEE Supporting member	Adult 18 years old on the day of signature or the month following birthday	Discounted Children, students (under 26) AVS/AI/AC, N/F/S permits
Standard (Classes, 1x/week)	CHF 45.00	CHF 40.00
Premium (Unlimited)	CHF 70.00	CHF 60.00
Application fees (for the 1st registration only)	CHF 10.00	CHF 10.00
Special discounts (please indicate the reference)		



The amount of the membership fee is payable by bank transfer or electronic transfer approved by the Association (circle the method of payment chosen) and may vary from one year to the next.

The status of supporting member **does not confer the right to vote**, but allows you to benefit from services offered by the Association, in particular participation in training sessions, demonstrations, seminars, conferences, excursions, open-house events, to participate in third-party events in collaboration with the Association, among others.

I undertake to be personally insured in Civil Liability and Accident for all risks linked to my participation, or that of my family or accompanying person, in all services organized by the Association.

I authorize the Association to take photos and post them on different media.

Purposes of processing: this data is collected in order to keep our members file up to date; under no circumstances will this data be transferred or sold to third parties. Data controller : info@bujutsukai.ch.

Location

Date

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Signature of the member

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Signature of guardian (if applicable)