



Lethbridge Kyodokan Judo Club 2017/2018 Registration

Registrant Information				
First Name		Last Name		Birthday (yyyy-Mon-dd)
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female		Personal Health Care #	Rank (leave blank if you're new to judo)	
Address			City	
Postal Code	Phone	E-mail (Leave blank if you do not wish to receive emails from the club)		

Category (If you are new to judo choose beginner regardless of age; except for Pre-Judo registrants)
<p>Pre-Judo (Note Pre-Judo does not qualify for the family rate) <input type="checkbox"/> Pre-Judo (Born 2011-2012) - Thursday (4:30 to 5:00 PM) - \$150</p> <p>Beginner (Born 2010 or earlier) - \$500 (choose one option only)</p> <p>Youth / Family <input type="checkbox"/> Wednesday (5:00 - 6:00 PM) & Saturday (9:30 - 10:30 AM) <input type="checkbox"/> Tuesday & Thursday (6:15 - 7:15 PM)</p> <p>Adult Beginner <input type="checkbox"/> Monday (8:00 - 9:30 PM) / Wednesday (7:30 - 9:00 PM)</p> <p>Returning Members <input type="checkbox"/> Youth (Born 2005 - 2009) - \$550 <input type="checkbox"/> Adult (Born 2004 or Earlier) - \$600</p> <p>Other <input type="checkbox"/> Volunteer <input type="checkbox"/> Affiliate (U of L, RTC, Other Clubs with a Paid Provincial Membership, etc..) - TBD</p>

Parent / Guardian Information (If registrant is under 18)		
First Name	Last Name	Phone
First Name	Last Name	Phone
Emergency Contact (Only if different from Parent / Guardian)		
First Name	Last Name	Phone

Office Use Only	
<input type="checkbox"/> E-Transfer _____ <input type="checkbox"/> Cash _____ <input type="checkbox"/> Cheque _____ <input type="checkbox"/> Multiple cheques - cheque # (____), (____), (____), (____), (____) <input type="checkbox"/> Family Rate _____ X \$75 = _____ - Total _____	Notes



Pipeda Agreement

1. The personal information you provide to your Judo club is collected under the authority of the PIPEDA (Personal Information Protection and Electronic Documents Act) privacy bill for Canada. It is used to determine your eligibility for competitive and recreational opportunities, age related events, for class placement, to facilitate your enrolment, to administer and evaluate programs/courses of benefit to athletes, coaches, Board Members, volunteers and referees, and for insurance and statistical purposes. In addition, personal information may be, from time to time, submitted to major funding bodies in order to verify registration and meet the funding requirements. This information will be transferred in a safe format. It will be password protected and will be sent as hard copy only.
2. Member clubs of Judo Alberta collect information from their members when they register to take part in a Judo program. Information is also collected from Board Members, volunteers, coaches and referees in order that the members can be registered with Judo Alberta and Judo Canada. Registration information required by these National Governing Body for Judo may include: name, age, birth date, address, gender, emergency contact information in case of accident or illness, competitive level attained and citizenship information.
3. Your club's Privacy Officer, as well as the Privacy Officer for JUDO ALBERTA, are responsible for your personal information, and the personal information concerning any minor children, and they ensure that all personal information is handled in a confidential manner, and all reasonable precautions are taken to avoid loss, theft or unauthorized access, disclosure, copying, use or modification. Any requests to view your personal information should be made in writing to the board appointed club privacy officer or the JUDO ALBERTA board appointed provincial Privacy Officer (JUDO ALBERTA, 11759 Groat Road, Edmonton, AB T5M 3K6) The JUDO ALBERTA privacy officer contact information will be posted at www.judoalberta.com in accordance with required notification procedures.

Please fill in and sign the following form, indicating that you allow the transmission of personal information from the Alberta clubs to the Judo Alberta office, and the subsequent transmittal of personal information as indicated in Paragraph 1 & 2 of this document. **Failure to submit this form will constitute denial of membership from Judo Alberta.**

Member Name: _____

Date: _____ Phone Number: _____

Email: _____

Signature of Participant or Parent/Guardian if under 18 years: _____

For Club Use Only:

Copy taken for Club Files Date:

Exclusion List Sent to JUDO ALBERTA Date:

For JUDO ALBERTA Use Only:

Exclusion List Received Date:



Image and Information Release Form

Members of Judo may have their image, likeness, name (excluding personal address, phone, fax number, and/or email address), province, city/town, and club, as well as rank within Canada used in publications and on the internet by JUDO ALBERTA as well as its agents and sponsors from time to time. When signing this form, athletes, volunteers, coaches, referees and, in the case of minors, their parent/guardian, agree that they have the authority to provide this authorization/approval to JUDO ALBERTA. A facsimile, a scanned and emailed copy, or a photocopy of this form shall be deemed to constitute an original signed document.

1. I allow the use of personal information as outlined above, and image in JUDO ALBERTA and Club Media, including newsletter, website, poster, brochure, video, sponsorship packages.

YES (If yes, please sign and date the following form)

NO (If no, please indicate in question 2.0 if there are any media in which your, or your child's image, name or information may NOT appear.)

2. This is a list of the media in which a likeness or information might appear. Please check all media which you **DO NOT** permit:

2.1 JUDO ALBERTA and/or Club Newsletter, including competition results, stories and games from athletes

2.2 JUDO ALBERTA and/or Club Website, including event celebrations and activities that take place in the province

2.3 JUDO ALBERTA and/or Club Poster

2.4 JUDO ALBERTA and/or Club Brochure

2.5 JUDO ALBERTA and/or Club Video

2.6 JUDO ALBERTA and/or Club Sponsor Package

Member Name: _____

Date: _____ Phone Number: _____

Email: _____

Signature of Participant or Parent/Guardian if under 18 years: _____

If Photographs of the athlete are provided to JUDO ALBERTA or to your club, please send each photograph together with the photographer's express written permission for JUDO ALBERTA or your club to use the photograph(s) on the internet, in publications related to Judo, and in sponsorship materials for Judo.

Failure to submit this form will constitute denial of membership from Judo Alberta.

For Club Use Only:

Copy taken for Club Files Date: _____

For JUDO ALBERTA Use Only:

Exclusion List Received Date: _____

