



KENYA KARATE FEDERATION

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Recognized by KNSC, NOC-Kenya, UFAK and WKF



MEMBERSHIP APPLICATION FORM-MINOR

MINOR'S INFORMATION

Full Official Name: _____
Birth Certificate/Passport No: _____
Date of Birth: _____ Gender: _____
Grade: _____ County Karate Association: _____
Karate Club: _____
Karate Style Association: _____
Occupation: _____
Phone No.: _____ Alternative Phone No.: _____
Email Address: _____

**AFFIX A
PASSPORT
PHOTO**

PARENT/LEGAL GUARDIAN'S INFORMATION

Full Official Name: _____
National ID/Passport No.: _____ Email address: _____
Relationship to the Minor: _____
Phone No.: _____ Alternative Phone No.: _____

EMERGENCY CONTACTS

Full Official Name: _____
National ID/Passport No.: _____ Email address: _____
Relationship to the Minor: _____
Phone No.: _____ Alternative Phone No.: _____

Indemnification Clause

I, the undersigned, hereby consent to the release and discharge of the Kenya Karate Federation, its representatives and affiliates from all claims, liabilities, damages, or expenses arising from my child's participation in any Federation activities, events, or programs. This includes any injury, illness, death, or property damage, whether caused by negligence or otherwise, and any violation of Federation rules.

Imagery Rights Clause

I, the undersigned, hereby grant the Kenya Karate Federation the irrevocable and unrestricted right to capture, use, reproduce, and distribute photographs, video recordings, and any other media of my child taken during Federation events, activities, or programs. This authorization includes, but is not limited to, use for promotional materials, publications, websites, social media, and any other lawful purposes in any format, without compensation or further approval. I waive any rights to royalties or other compensation related to the use of my child's image, likeness, or voice and release the Federation from any claims, demands, or liabilities arising from such use.

Consent and Declaration

I, the undersigned parent/legal guardian, hereby consent to my child's participation in all activities organized by the Kenya Karate Federation. I acknowledge and accept all associated risks and agree to abide by the Federation's rules and regulations.

Name of the Guardian: _____

Signature: _____

DATED AT _____ THIS _____ DAY OF _____ 20_____

FOR OFFICIAL USE ONLY

Status of the Application: Approved Rejected

Allocated Membership No.: _____

Membership Fee Paid: Yes No

Approving Officer's Name: _____

Authorized Signature: _____

Accompanying Documents.

Please attach the following to the Application Form:

- a) Copy of the National Identification Card/Passport.
- b) Copy of the Minor's Birth Certificate.
- c) Affix the passport photo on the form.
- d) Copy of the payment receipt.

N/B.

- a) The Application Fee is Five Hundred Kenyan Shillings (**Kshs. 500.00**) to be paid to Kenya Karate Federation Kenya Commercial Bank (KCB) Sarit Center Branch **Account No. 016200815220**
- b) Fill out the form in **BLOCK LETTERS**.
- c) Incomplete Application Forms will not be processed.