



SECTION 1 - Student Details

Name	Date of birth dd/mm/yyyy	M	F
1.	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>

MAIN CONTACT PERSON

[illegible]

SECTION 2 - Membership

☐ Existing Member (Go to Section #3)
 ☐ New Member
 Dojo: _____ First Class Date: ____ / ____ / ____
 Uniform Size: _____ Consultant Name: _____ Office Use: ☐ P ☐ E ☐ D

Membership Payment:

☐ Cash \$ ☐ Credit Card \$ **(Complete details in Section 4B) OR Please contact me for card details** ☐

SECTION 3 - Direct Debit Training Pass Options

☐ Single Student \$39.50pw ☐ 2 in family \$77pw ☐ 3 in family \$89pw ☐ 4 in family \$99pw

Direct Debit Payment:

I would like to pay via: ☐ Bank Account (Complete details in Section 4A) ☐ Credit Card (Complete details in Section 4B)

☐ Weekly ☐ Fortnightly ☐ Four Weekly ☐ Monthly

First Payment Date:

Summary of Direct Debit Conditions

1. Direct debit agreement is subject to a 48 hour cooling off period. 2. Students may suspend training passes for up to 6 weeks per year for a min. of 2 weeks each time. A \$5 pw fee applies to contract suspensions. 3. A one-off \$15.00 set-up fee will apply to your first direct debit payment. 4. Weekly Fee based on an annual rate divided by 52 weeks. 5. Students may opt-out at any time. 10 days' notice required to discontinue payments 6. Members who have their direct debit payment processed before 19 January 2026 will receive a 50% discount on training fees for the first month of their agreement. Please note: Your contract will display the standard training fee. Payments during the promotion will be manually adjusted by GKR Karate. 7. Full T's & C's will be sent via email upon processing.

☐ I have read and understood the above. Signature: _____

SECTION 4 - Payment Details

4A. Bank Account Details

Bank:	Name on Account:
BSB No:	Acct No:

4B. Credit Card Details

PLEASE CHARGE MY CARD

☐ VISA ☐ MASTERCARD

/

Credit Card Number Expiry Date CVV

Name on Card: Signature: Amount: \$