



## CLUB MEMBERSHIP

CLUB MEMBERSHIP				
PAID	YES		NO	
DATE				
OWED	YES		NO	

MICKEY	
FIGHTER	

Office Use Only	
Student No.	

**(PLEASE PRINT CLEARLY AND IN CAPITALS)**

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### PERSONAL INFORMATION

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Name: \_\_\_\_\_

Home Address in full: \_\_\_\_\_

\_\_\_\_\_ Postal Code: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_

**\*\* Signature of Parent or Legal Guardian on page 6 required if applicant is aged 18 years or under.**

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### EMPLOYER INFORMATION

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Current Employer: \_\_\_\_\_

Business Address: \_\_\_\_\_

\_\_\_\_\_ Postal Code: \_\_\_\_\_

Type of Business: \_\_\_\_\_ Phone: \_\_\_\_\_



## CLUB MEMBERSHIP

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### MEDICAL INFORMATION

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This form must be completed by ALL participants and will be held on record with Titan Fighter Mixed Martial Arts Academy for the duration of your participation.

1. Do you suffer from any medical/mental/emotional condition or disability (e.g. epilepsy, asthma, diabetes, dizziness, deafness, claustrophobia etc.)?

YES  NO  (Please tick appropriate box)

If yes, please a brief description of condition: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If this is a condition, which could be affected by physical activity, please enclose a letter from your own doctor giving details of the complaint and its treatment as well as a professional opinion about your participation.

2. Have you ever had any surgery (e.g. Spinal, metal implants, pacemaker, heart problems, hysterectomy)?

YES  NO  (Please tick appropriate box)

Give Details: \_\_\_\_\_

3. Are you taking any medication that could hinder or affect your participation in this activity?

YES  NO  (Please tick appropriate box)

Give Details: \_\_\_\_\_

4. Do you wear contact lenses?

YES  NO  (Please tick appropriate box)



## CLUB MEMBERSHIP

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### IN CASE OF EMERGENCY PLEASE NOTIFY

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1. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_
2. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

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### DECLARATION

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**I have read and fully understood the above. As a participant of the Titan Fighter Mixed Martial Arts Academy, I fully understand the possibilities of injuries' that exist. I comprehend that there are risks of injury resulting from participation in such training and release TITAN FIGHTER, Mickey Papas or any persons authorised by the above named, from any liability or claim which may arise as a result of injury received for failing to mention any conditions, medical or otherwise which I have not declared.**

Name: (Print) \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## CLUB MEMBERSHIP

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### TERMS & CONDITIONS

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- 1. I acknowledge that participation in the martial arts entails unknown and unanticipated risks, which could result in physical or emotional injury, paralysis damage or death to myself, to property, or to third parties. I understand that such risks simply cannot be eliminated without jeopardising the essential qualities of the activity. The risks include, among other things: intense, stressful and strenuous exercises with body contact. I expressly consent to confront these known and unknown dangers and further agree, understand and recognise that these risks may result in serious injury or illness including but not limited to: bruises, bloody nose, broken bones, sprains, dislocations or other cardiovascular disease or other serious injury. Furthermore, TITAN FIGHTER/ Mickey Papas or any other persons authorised by the above named to instruct have difficult jobs to perform. They seek safety but they are not infallible. They might be ignorant of a participant's fitness or abilities. They may give inadequate warnings or instructions and the equipment being used may malfunction.**
- 2. I expressly agree and promise to accept and assume all of the risks existing in the activity. My participation in this activity is purely voluntary and I elect to participate in spite of the risks.**
- 3. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless TITAN FIGHTER, Mickey Papas and any other persons authorised by the above named to instruct, from any and all claims, demands or causes of action, which are in any way connected with my participation in this activity or my use of TITAN FIGHTER facilities, including any such claims which allege negligent acts or omissions of TITAN FIGHTER.**
- 4. Should TITAN FIGHTER, Mickey Papas or any acting on their behalf, be required to incur solicitor/courts fees and costs to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs.**
- 5. I certify that I have adequate insurance to cover any injury or damage I may cause or suffer while participating, or else I agree to bear the costs of such injury or damage myself. I further certify that I have no medical or physical conditions, which could interfere with my safety or the safety of others in this activity. I am willing to assume – and bear the costs of – all risks that may be created, directly or indirectly, by such conditions.**



## CLUB MEMBERSHIP

**I have had sufficient opportunity to read this entire document. I have read and understood it, and agree to be bound by its terms.**

**The undersigned does hereby apply to become a student at the Titan Fighter Mixed Martial Arts Academy.**

**By such application, the undersigned does acknowledge that the above noted information is true and correct. The applicant also agrees that if accepted as a Student of the Titan Fighter Mixed Martial Arts Academy, he or she will abide by the terms and conditions set forth herein.**

**TITAN FIGHTER / Mickey Papas have the right without reservation to refuse or terminate the terms of this contract at any time, without prior notice.**

**Print Name:** \_\_\_\_\_

**Signature of Participant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Please Note:** When reference is made to **TITAN FIGHTER** this also includes Mickey Papas and any other authorised persons mentioned by the above named herein.

**Mickey Papas** is short for **Miltiades Papaconstantinou**



## CLUB MEMBERSHIP

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### **\*\* PARENTS OR GUARDIANS ADDITIONAL INDEMNIFICATION**

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In consideration of \_\_\_\_\_ (print minors name) being permitted by TITAN FIGHTER Academy to participate in its activities and to use its equipment and facilities. I further agree to indemnify and hold harmless TITAN FIGHTER, Mickey Papas or any other authorised persons by the above named from any and all claims which are brought by, or on behalf of minor, and which are in any way connected with such use or participation by a minor.

**Print Name**  
**(Parent or Guardian):** \_\_\_\_\_

**Parent or Guardian's Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_



## **CLUB MEMBERSHIP**

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### **CODE OF CONDUCT**

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- 1. Participants must wear clean academy uniforms or other suitable training Apparel.**
- 2. Participants must maintain a high standard of personal hygiene at all times when at the Academy.**
- 3. Absolutely NO foul language, sexist/racist or any other offensive comments or behaviour will be tolerated what so ever and could result in participant being refused to train and any other application for membership withdrawn.**
- 4. No Bullying or abuse could be placed in effect.**
- 5. No external shoes on the mats.**
- 6. Any problems, which may occur, speak to the instructor or assistant instructor immediately.**