



Federation of English Karate Organisations International

Registration for New & Renewal of Association Instructors + Volunteer Helpers
to the Federations Safeguarding, Child & Vulnerable Adult Protection Policy.
For registered Federation Members Associations only of FEKO, FEKO Int and FMA.

All contact will be via the Registered Association/Group.

Instructors must be a least 1st Dan and a minimum of 18 years of age.

This is not recognition of any qualifications.

All people working with children and vulnerable adults have to abide by an approved policy guideline. We register our members and issue a certificate as proof of this. Failure to comply with these guidelines may result in the Public Liability cover being invalidated.

Association (full name, not initials)

This must be the group registered with the Federation and not a sub group.

Instructor or Volunteer full name

Address

Post Code

Telephone No:

E-mail

State – Instructor or Volunteer helper

State if FMA member

Dan Grade

Date of Grade

Date of Birth

Previous CVA registration number R

Applicants Personal Declaration: I confirm that I have read and agree to abide by the Federation guidelines and duty of care for the Protection of Children & Vulnerable Adults and I accept my responsibilities and commitment to these policies.

* I also confirm that there is no reason why I should not have unsupervised access to children, young people or vulnerable adults.

* I also confirm that I have never been investigated for, or convicted of any offence relating to children, young people or vulnerable adults, nor are there currently any investigations taking place, or to my knowledge about to start.

* If yes give details on a separate sheet.

By returning this form you agree abide by Safeguarding Policy as published on www.feko.co.uk Policies and that all the information given is correct. A hard copy of the policy will be sent for new applications plus the registration certificate to the return address below.

Signed

Date

The following is to be completed by the Chief Instructor or Committee member) and all documents sent to the return address

I confirm that (applicant's name)

is known to me and the details listed are to my knowledge accurate.

Signed

Position held

Date

Return address

Return to Noel Mantock, FEKO International Chair. Box 410, 266 Banbury Road, Summertown, Oxford, OX2 7DL or via noel@feko.co.uk

Enclose Fee £5.00 ☐ Registration will only occur with the return of this fully completed form and payment of £5.00 made out to FEKO International. Or Bank transfer ☐ To FEKO International NatWest Bank (Beeston). Branch sort code 51-70-06 Account number 51746174 A certificate will be issued and sent to the registered group. Registration is valid for 1 year when still in membership of the Federation.

For Official Use Only

Date received

Fee paid £

Reg. No. R

Date certificate + manual sent (new application)