



APPLICATION TO PAY CONCESSIONARY FEES

I hereby apply for permission to pay concessionary fee for the current year 20_____

PLEASE PRINT CLEARLY

Name of Dojo _____

Applicant _____

Address _____

_____ Post Code _____

Email _____ Tel/Mobile _____

STATUS

PROOF OF STATUS ATTACHED*

Student _____

Unwaged _____

Other _____

*If unable to provide a copy of proof of status, please show original for verification

Proof of status checked by:

Name: _____ Signed: _____ Date _____
 Please print

COMMENTS:

SIGNED _____

DATE _____

Please note that the above data will be stored electronically and only used for BB purposes