



## Application Form for MMA Classes – 2016/17

Name of Student	Age	Gender M/F	Classes Attending			
			(Bollywood, Classical, Karate, Music, Malayalam etc)			

**Name of Parent or Guardian** .....  
(If student is under 16 years of age)

**Address** .....  
.....

**POST CODE** .....

**Mobile Number** .....

**E-Mail** .....

**Does the student have any disability? Yes / No**

**If yes, please mention the disability** .....

**Declaration**

I hereby certify that all information contained in this form is true and correct to the best of my knowledge and accept all the rules and regulations of Manchester Malayalee Association based on the constitution. (Available at [www.mmaonline.org.uk](http://www.mmaonline.org.uk)). I agree that photos/videos of my kids might be taken and used for promotional activities of MMA. I agree that, it is my responsibility as parent/guardian to ensure the safety of my children and children shouldn't be left alone at the MMA premises. I agree that MMA only provides training and performances at events are not guaranteed.

**Signature** ..... **Date** .....

**For office use only**

**Member:** Yes / No      **Paid:** Yes / No      **Amount:** .....

**Received By:** .....      **Date:** .....