

# Shaolin temple Martial Arts and Cultural Centre



## For every women's Safety



Terms and Conditions and creating account instruction

## ***Terms and conditions***

For every women's safety is a fully funded project by National Lottery for all ladies age 11+ residence in Enfield.

All participants must adhere to the following:

1. Submit an application form , health and safety monitoring using the following link:  
<https://forms.gle/2dxY3iGvus1Z77oz6>
2. Each participants age 18+ must submit a unique email address on the form used for booking purposes
3. Participants must be age 11+
4. All bookings are made available online 5 to 7 days in advance and places are given on first come, first served basis
5. Each participant to book a maximum on 1 session per week
6. If for any reason you are unable to attend your booked session, please cancel it immediately so other members can use this opportunity to book their sessions
7. If an attendee books the session without having submitted the online registration form, the booking will be cancelled
8. Attendees will be sent away if they have not book the session in advance and / or if the main registration form has not been submitted.
9. Attendees must respect and obey the instructor, fellow attendees and show respect for the training area.
10. You may not chew gum, talk or use inappropriate language.
11. Attendees are required to maintain good personal hygiene and cleanliness

**Shaolin Temple Martial Arts and Cultural Centre**  
**FOR EVERY WOMAN's SAFETY**

## Booking your place online:

After submitting your application form, please click on the link below and follow the instructions:

[https://my.coacha.app/member\\_signup/TKPSITV907](https://my.coacha.app/member_signup/TKPSITV907)

## Participants age 18+:

Please complete all the mandatory fields on this page, you will be prompted to create a password at the end of the page, once you submit the form, we will check the information against registration form that you have already submitted and grant you right level of access to your dashboard area to book your classes.

**Shaolin Temple Martial Arts and Cultural Centre – Member Record Request**  
Please fill in the form below to register your interest in joining Shaolin Temple Martial Arts and Cultural Centre. Your member record will then be created on our system.  
Shaolin Temple Martial Arts and Cultural Centre use Coacha to manage and administer our temple admin. All of your information is securely locked up in the cloud. Please try to ensure all information is correct and accurately entered.

**Member Information**

First Name	Last Name	DOB	8 ▼	Dec ▼	2002 ▼
Email	Mobile	Other Number			
House Number or Name	Address Line 1	Address Line 2			
Town or City	County or Area	Postcode			

**Next of Kin / Parent / Guardian Information**

First Name	Last Name	Mobile	Email
Relationship to Member		<input type="checkbox"/> Is this the primary contact instead of the Member?	
Contact 2 Name	Contact 2 Mobile	Contact 2 Email	

**Medical Information**

Any injuries, allergies, disabilities, illnesses or relevant health concerns your instructors should know about?

Add Health Notes...

☐ Tick if no health issues

## Shaolin Temple Martial Arts and Cultural Centre FOR EVERY WOMAN'S SAFETY

### Terms & Conditions

I confirm that the above information is correct to the best of my knowledge and that I hereby provided agreement for this information to be stored in Coacha's databases.

For Coacha Terms and conditions click here.

☐ I agree to the above

### Data Protection & Use

Data protection best practice requires you/your child to opt in for the above temple to use your data. You must update your preferences on the following options.

(Note: without the first two options ticked, you (or your child) cannot be added to Coacha).

- ☐ I agree for you to use my data for legal reasons associated with the running of your temple.
- ☐ I agree for you to use my data so that you can provide me with your temple's services.
- ☐ I agree for you to use my data so that I can receive benefits as part of my membership, including occasional marketing info.

### Account Password

You can optionally supply a password to allow you to login and view/update your details.

You will only be able to login after the temple has accepted your sign up.

This password will apply to the member email address: test@tsst.com

Password

SUBMIT

> you, your children or friends attend other clubs? Or maybe you're a instructor or helper somewhere? As Coacha helps organise clubs, take money and keep member's data safe, why not recommend us? Gift them a EE trial with extra red carpet treatment by [clicking here](#).

**Shaolin Temple Martial Arts and Cultural Centre**  
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## ***For all participants under the age of 18:***

It is our understanding that the system is designed to use the email address of the Next of Kin / Parent / Guardian to generate the user account.

Once the form is completed and submitted we will verify, and grant you the right level of access to your dashboard and booking area, for all participants under the age of 18, the login details will be sent to the email address of the Next of Kin / Parent / Guardian, this way Next of Kin / Parent / Guardian can have only one account to manage multiple participants. (e.g. 1 parent managing the login for 2 or more of their children and making booking on their behalf)

Please follow the following instructions:

**Shaolin Temple Martial Arts and Cultural Centre – Member Record Request**  
Please fill in the form below to register your interest in joining Shaolin Temple Martial Arts and Cultural Centre. Your member record will then be created on our system.

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**Member Information**

First Name

Last Name

DOB

8

▼

Dec

▼

2018

▼

Email

Mobile

Other Number

NOTE: Please enter parent or NOK email address for this minor in the NOK/Emergency contact section below

House Number or Name

Address Line 1

Address Line 2

Town or City

County or Area

Postcode

**Next of Kin / Parent / Guardian Information**

First Name

Last Name

Mobile

Email

Relationship to Member

☐ Is this the primary contact instead of the Member?

Contact 2 Name

Contact 2 Mobile

Contact 2 Email

**Medical Information**

Any injuries, allergies, disabilities, illnesses or relevant health concerns your instructors should know about?

Add Health Notes...

☐ Tick if no health issues

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☐ I agree for you to use my data so that you can provide me with your temple's services.

☐ I agree for you to use my data so that I can receive benefits as part of my membership, including occasional marketing info.

SUBMIT

 **COMMUNITY  
FUND**

  
SHAOLIN TEMPLE CULTURAL CENTRE