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DATE	YEAR	MONTH	DAY

JAPAN KARATE DO SHITO-RYU INTERNATIONAL RENSHIKAN

NOBUKAWA-HA

APPLICATION FOR AFFILIATION

Personal Information

First Name			
Family Name			
Date of Birth		Gender	
Permanent Address			
Nationality			
Mobile No.		Email id:	

Martial Arts Information

Start of Karate Career		Karate Style (Ryuha)	
Present Dan		Date of issue:	
Dojo Name:			
No. of Blackbelts		No of students:	

I declare that the information I have provided is true, and I agree to abide by the rules and regulations set forth by the Japan Karatedo Shitoryu International Renshikan – Nobukawa-ha.

_____ DATE

_____ SIGNATURE OF APPLICANT

NOTE: Please attach with this form Photo ID evidence of your name and address to support your application. You must also attach photocopies of all Dan qualifications and any official positions you currently hold in any Karate Organizations. (E.g. State or National Referee or National Coach). Please fill this application in BLOCK letters.

DATE

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