



International Federation of Karate

APPLICATION FOR LIFE MEMBERSHIP

APPLICANT'S DETAILS

I,
(full name of applicant)

of
(address)

..... **Postcode** **Date of birth**

Telephone Contact number **Grade**

Only applicable if joining with a recognised grade from another organisation (including other Kyokushin groups)

Email :
This is optional. If applicant is under 14yrs, parent's or guardian's email is preferred.

hereby apply to become a student member of the above named Federation. In the event of my admission as a member, I agree to be bound by the rules of the association for the time being in force.

.....
Signature of applicant (if 18 yrs or older) Date

.....
Signature of parent/legal guardian Date

PROPOSER

I,, member of the *International Federation of Karate* ,
and Operator of *dojo* nominate the applicant for membership in the
Federation.

.....
Signature of proposer Date

OFFICE USE ONLY

Date application received Membership number :

Paid: Yes No Cash Cheque No.

Application approved Yes No Signature of Approver