

日本空手協会 (ダーダル)

Nihon Karate Kyokai (Dadar)

Winter Training Camp Application Form

PHOTOGRAPH

NAME OF AP	PLICANT _.				
SEX	AGE		_ DATE OF BIRT	Н	
				11	
STATE					
PRESENT KY	U/DAN				
HAVE YOU A	ATTENDE	D ANY PRE	VIOUS NATIONA	AL CAMPS	YES / NO
WHETHER A	TTENDIN(G TECHNICA	AL SEMINAR DU	RING CAMP	YES / NO
WHETHER GI	VING GR	ADING AT F	END OF CAMP Y	YES / NO	
IF YES WHAT	KYU / D	AN /			
WHETHER G *(Applicant must be m			HNICAL LICENC	E EXAM *	YES / NO
IF YES FOR	JUDGE	YES / NO	IN	ISTRUCTOR	YES / NO
I affirm that I am ta responsible for any u	king part in the	Karate Camp of	TAKING BY API my own free will and that during the course of training	t I will not hold the	e Institution, Instructor or organizer the camp.
				Signat	ure of Participant/guardian if minor