Membership Application

2016

I am requesting membership for the **North American Beikoku Shido-kan Association,** directed by Hanshi Iha. All memberships have the right to be denied or canceled by Hanshi Iha at any time.

*On lines with an asterisk, fill in only the sections that have changed since last years application (Current members only)

1.	Chack	one box. Renev	val 🗸	First V	Year				
			vai 🔽	•	urrent member)				
2.		pership I.D. #		(II a Ci	urrent member)				
3.	Name								
4. -	*Add	ress							
5.	*City								
6.		e/ Province							
7.		al Code							
8.	*Cou	ntry							
9.	Birth	Date							
10.	Phone	e: Home							
11.	*Phor	ne: Cell							
12.	*E-ma	ail							
13.	Gende	er	Male						
14.	*Pres	ent Rank		Dan	Kyu				
15.	*Date	of last test							
16.	*Nam	e of Your Dojo							
17.	*Instr	*Instructor's Name							
18. 19.	be list	Please check this box if you <u>WOULD</u> like to be included in the Shido-kan Directory containing your name, rank, dojo, city, state, phone number and e-mail address. Directories w be listed and updated on our web page, <u>www.ihadojo.com</u> . Please send this application and the appropriate fee to: Original Okinawa Karate 2002 Cedar St. Holt, MI 48842							
		One year	\$30						
		Three years	\$80						
		Five years	\$120						
		Life-Time	\$300						
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