<u>Federation of Okinawa karate do shorinryu</u> <u>shorinkan india</u>

APPLICATION FORM FOR ADMISSION TO KARATE CLASS

Name of the applicant			
ccupation Date of Joining			
Address			
Tel. No. (Resi)	(Office)	(Mobile)	
Date of birth	Blood Group		
Father's Name	Occupation		
Office Address			
Office telephone No	P	Mobile Phone	
Do you have any police reco	d if yes give detail		?
Do you suffer any ailment? _			
RULES & REGULATIONS			
1. Association / instructor will learning.	ll not be held responsib	le in case of any injury during the	course of karate
2. Student must wear proper	karate uniform during	the course of karate practice.	
3. Students must deposit the	ir dues in time, if any.		
4. Students are allowed to te	ach karate skills withou	t the permission of chief instructo	or.
Place			
Date			
Signature of parent / guardia	an (in case of minor) Sign	nature of applicant	
For Official Use			
Signature of Dojo Instructor			
Registration number		_ Dojo	_
Passport Size			
Photograph.		Seal and signature.	