

MARTIAL ARTS HEALTH & FITNESS ASSOCIATION e.V.

MEMBERSHIP REGISTRATION

Lifetime Membership: 50 \$

I. GENERAL INFORMATION: (ALL)

Name: _____ Address: _____
City: _____ State: _____ ZIP: _____ Phone: _____
Age: _____ Sex: _____ Occupation: _____ E-Mail: _____
Education: H.S. College (Name, Degree) _____

II. MARTIAL ARTS BACKGROUND: (ALL)

How many years have you been in the Martial Arts? _____ Are you currently training? Yes No

| Rank | Date | Art / Style | Instructor |
|------|------|-------------|------------|
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III. INSTRUCTOR / SCHOOL INFORMATION

Teaching? Yes No If Yes, School Name: _____
Address: _____
School Website: _____ School Phone: _____

IV. ADDITIONAL INSTRUCTOR / SCHOOL SERVICES:

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|---------------------------------------|---------|--------------------|----------|
| Certified Instructor | : 50 \$ | Promotion 1st. Dan | : 75 \$ |
| Certified Examiner (Students Ranks) | : 50 \$ | Promotion 2. Dan | : 100 \$ |
| Master Examiner | : 100\$ | Promotion 3. Dan | : 125 \$ |
| Master / Sifu Title | : 100\$ | Promotion 4. Dan | : 150 \$ |
| Grandmaster / Soke / Sijo - Title | : 150\$ | Promotion 5. Dan | : 175 \$ |
| Registration of current Rank | : 25 \$ | Promotion 6. Dan | : 200 \$ |
| Promotion / colour Belts | : 25 \$ | Promotion 7. Dan | : 250 \$ |

All prices plus S/H

V. PAYMENT

Pay Pal / email: kampfsport-emden@web.de or Western Union