

MEMBERSHIP FORM

Individual sheet	
Name :	
First name :	Join 2 ID photos
Address:	· '
Postal Code : City :	
Country:	
Phone :Fax :	
E-mail :	
Birth date : Sexe : H/F	
Grade : Obtained on the :	
Karate Club Card	
Name :	
Address:	
Auticoo	
Postal Code : City :	
Country:	
Phone : Fax :	
Web Site :	
E-mail :	
Various information	
☐ I authorize the International Karate-Do Academy to send me information emails from its website.	
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Fill out this form and send it together with its rules and 2 passport photos to :

M. Lavorato Jean-Pierre - 515, chemin de Seillans - 83600 Bagnols en Forêt - France (check in euros payable to Jean Pierre Lavorato)

The Academy Steering Committee reserves the right to accept or reject any application for membership.

Date: Signature: