



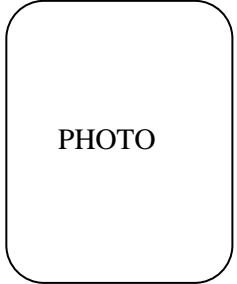
THE SHOTOKAN SPORTS KARATE DO FEDERATION

Approved by: Karate India Organization (KIO)

WKF Member: World Karate Federation (WKF) Asian Karate Federation (AKF)
Commonwealth Karate Federation (CKF) and South Asian Karate Do Federation (SAKF) WKF Recognized BY: International Olympic Committee (IOC)

Head Office: Sa 5/150 K-J Sanjay Nagar Colony Ramrepur Pahariya Varanasi-221007 U.P. India

AFFILIATION / MAMBERSHIP FORM



I hereby affirm on the as under,

- 1 I intend to be legally bound as a condition of members of **The Shotokan Sports Karate Do Federation**
- 2 I shall give all information of all my activities of Shihan Ashish Bhardwaj President/ CEO/Chief Instructor India
- 3 I shall not entertain any other organization or person
- 4 I and my instructors have not right to claim renewal certificate as a matter of right.
- 5 I will provide training of the students as per syllabus of The Shotokan Sports Karate
- 6 I shall be responsible for my suspension and losses there by to the federation if I violate the above rules as laid by The Shotokan Sports Karate Do Federation, India Varanasi.

Signature of Applicant

Undertaking

I have read the above condition and hereby agree to abide by the rules and regulations, instructions send from time to time by national head quarter as well as district & state association and **Karate Organization India** with which our style is affiliated. All matter concerning the instructor and Shihan Ashish Bhardwaj shall be subject to the jurisdiction of the courts of law at Delhi,

NATE: Please Attach Photo Copy of ID & Address Proof such as Voter ID Card PAN Card & Passport with this form

Name of Representative.....
 Date of BirthAge.....Sex.....Nationality.....
 Present Rank.....Style Name
 Branch/Club Name.....
 Address.....

 Mobile.....Email.....

Signature of Applicant

Signature of Instructor