ISKF 国際清心流空手古武道連盟
International Seishinryu Karate-Kobudo Federation

Registration application 登録申請書

Registration Department ☐Karate ☐Kobudo ☐IAI

名前 Name_____

生年月日 date of birth_____

国籍 Country of Citizenship_____

武道開始年 Budo training start year_____

修行流派名 style (Ryuha Name)_____

道場名称 Your dojo name_____

道場数 Number of dojos_____ 道場生徒数 Number of your students_____

あなたの先生 Your teacher_____

あなたの現在の段位 Your DAN rank_____ Dan

発行者 Your DAN Rank Certified person_____

推薦人 ISKF member name that recommends you _____

申請日 Application date_____

Please attach your photo data
Send us a copy of your certificate from your Shodan to your current Dan rank
Please send the membership fee by Paypal
We will inform you of the PayPal address after approval.