

**Member:** Japan Karate Association, Tokyo **Approved by:** Karate India Organisation (WKF & AKF) **Registered Office:** Aakriti Apartment, Flat B3, 880 Mukundapur, Satabdi Park, Block B, Kolkata 700 099 **Website:** www.jkawfindia.in **Email:** jkawfind@gmail.com **Tel:** +91 98833 11728

NAME OF THE ORGANIZATION:

2.

## APPLICATION FOR BRANCH MEMBERSHIP

PROPOSED NEW NAME OF T	HE ORGANISATION:	
		nembership viz JKAWF INDIA Assam, JKAWF INDIA
Karnataka, or your own organisation i	name etc. Please discuss with Kolkata HQ be	gore finalisation.j
NAME OF THE HEAD INSTRU	CTOR:	
FULL POSTAL ADDRESS WIT	H PIN:	
MODINE NO		77.647
MOBILE NO:	WHATSAPP NO:	EMAIL:
PRESENT RANK:	THE A CHINIC I	ZADAME CINCE
STARTED KARATE IN YEAR:	TEACHING I & Certificates, Aadhaar Card and PAN Card	KARATE SINCE:
	<u> </u>	A Fussport Sizej
NAME OF SECRETARY OR CO		
MOBILE NO:	WHATSAPP NO:	EMAIL:
NUMBER OF DOJO:	TOTAL NUMBER OF STUDE	ENTS:
NUMBER OF SCHOOLS:	TOTAL NUMBER OF STUDE	ENTS PRACTICE KARATE THERE:
NUMBER OF BLACK BELTS:		
NUMBER OF INSTRUCTORS:		
STYLE OF KARATE PRACTICE	 ED:	
YAZ 1 1 C .1 .		1 11 747 1
		eaded by me. We have no connection with any
		application. I have gone through the Rules s of the 'JKAWF INDIA' properly; understood
		lecided to apply for Branch Membership to the
JKAWF INDIA at our own will a	=	recided to apply for branen membership to the
•		s, Regulations, and Bylaws and adhere to the
		is applicable. I also do promise to work jointly
		mote and safe guard JKA karate in my region.
	,	suspend or terminate my personal or branch
		ffence / or maintaining dual membership with
		tive WKF state association) or by any act for
		A or Karate-Do in general. I will also submit the
=		KA Passport Fee for all our students and submit
the reports of my branch, distr	rict or state headed by me, time to t	.me.
Witness: (Full Name, Mobile No. & S	ianature)	
1.	<i>U</i> ···· • <i>y</i>	Signature of the Applicant
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