

INTERNATIONAL KARATE KOBUDO FEDERATION

2024 INDIVIDUAL NEW MEMBERSHIP APPLICATION

DIVISION: () Karate, () Karate-Kobudo, () Kobudo

MEMBERSHIP TYPE / FEE: () Individual Member \$45/ yr*
() Associate / Non-Dojo Member \$55/ yr*
() Lifetime Member \$350.00

*Note: Memberships are on a calendar year basis. All new members receive a IKKF patch. If joining after October 31st, membership will cover November & December plus next calendar year.
Make checks payable to: IKKF*

Name of Applicant _____ Sex _____ Age _____

Address _____

City _____ State _____ Zip _____

Country _____ Phone () _____

Email Address _____

Present Dojo _____ Sensei _____

Dojo Address _____

Karate Rank * _____ Style _____

Kobudo Certification * _____ Lineage _____

Organizational Affiliations _____

Licenses _____ Issued By _____

Each IKKF Individual / Dojo Member MUST be an active member of a IKKF Registered Dojo in good standing. All new members receive a Membership Certificate and Patch. Active IKKF Membership status is required to receive any IKKF Rank Certifications. All Individual Memberships in the IKKF are **renewable on January 1st regardless of the month the application was submitted** (except Lifetime Membership).

By applying for membership, I hereby fully and unconditionally release the IKKF, its Officers and Directors, Licensed Instructors, and Member Dojos from any and all claims for any and all injuries, accidents, or losses that I may receive while practicing the Karate-Kobudo arts sponsored by this Federation. I also understand that the parents, other participants, or IKKF staff may be photographing group activities, ceremonies, seminars, etc. for IKKF promotional or personal use and I agree to allow my photo to be taken during these IKKF Events without recourse, financial or other compensation.

** Note: For all new Yudansha applicants please submit a copy of your martial arts resume as well as copies of all Dan Certifications (Menjo). If you are a member of a IKKF Registered Dojo, there is no need to supply copies of rank menjo.*

Signature of Applicant _____ Date _____

If minor, signature of parent or guardian _____

Mail form to:

INTERNATIONAL KARATE KOBUDO FEDERATION, 11 Club Lane, Reading, Pennsylvania. 19607 USA

Ph: (610) 921-3601 * IKKF Web Page: <http://www.ikkf.org> * Email: "ikkf@ikkf.org"