Australian Board Of Kanchos

Application for Membership into the Australian Board Of Kanchos.

Fill out form below starting with full name of person applying for grading.

Surname:	Other Names:				
Address:			Post Code		
Country:	Male:		or	Female:	
Mobile: Club Ph :	Ph Home:				
Email Address:					
Website (if any)					
Occupation:	Date of Birth:	:			
Name of Martial A	rts club				
Main headquarters	address				
Is the club	registered as a business?				
or	non profit club.				
Is the	club incorporated?				
How many yea	ars has this club been going?				
	ve up to date insurance? ease give details.				
Approximately	how many active students?				
Your orig	ginal instructors name				
Can we con	ntact him/her (yes or no)				
	ontact details Leave this clear if with your original instructor.				
All details or	n this form will be held on a private	databa	ase with no	o access to	the internet.
	nd all the conditions in regard to this d I will except the ABOK decision as fin	nal.	Signed		
	ABOK or any of its members will not be le for loss or injury sustained my me.	e held	Date		