

GOJU-RYU KARATE-DO KYOKAI

APPLICATION FOR G.K.K. & DOJO MEMBERSHIP

Date	D0J0			
Full Name	•	Birth Date	Sex	
Address	Postal/Zip Code	City		
State/Province	Postal/Zip Code		Phone	
ID/SS#	Health			
Where Employed		Occupation		
	ions which would restrict your ability to enga the reverse side of this form and state if you		cal activity? Yes No If yes, describe bing treatment for this condition(s).	said
			ar ability to engage in vigorous physical activit atment, in detail on the reverse side of this for	
3) Is there any reason why reverse side of this form		igorous physical activ	rity? Yes No If yes, describe in deta	il on the
I do hereby swear that the abomembership can be denied or		rstand that according	to the discretion of the instructor or the direct	or my
officers, participating members the aggravation of such, dece out of, or caused in any way l	ers and instructors, all clubs, organizations, arease, all claims, demands, cost, losses, and exby, or having any connection with my partici	nd firms of any and al penses, which I, my h pation in school activ	nnify the organization, including but not limite I liability for bodily injuries, disease, or ill hea eirs, and personal representatives may have ar ities, training, contests, and practice, and/or the any of the above listed, including traveling to	lth, or ising e use of
If accepted, I agree to abide b	by the organization rules, regulations, and cor	nstitution, and to cont	ribute to the goals of the Goju-Ryu Karate-Do	Kyokai
of Karate should be learned f harm anyone, except in defen	or use in self-improvement, competitive spor	t, or self-defense only	aximum self-defense which, in part, comprise to I swear unconditionally that I will never will all so long as the attacker poses a real threat and	lfully
Signed		Date		
Co-signed	er 21 years of age)	Date		
(if und	er 21 years of age)			
Instructor/Officer		Date		
	For GKK Headquarter	rs Use Only		
Date Recorded	Kyokai		GKK Card Patch	