

Club Registration Form



Dojo: _____ Phone: _____

Address: _____

Name Last, First	Age	Rank (kyu)	Sex	Height (cm)	Weight (kg)	Kata	Kumite	Team Kata	Team Kumite	Fees

Total Fees :

I certify that the above tournament applicants are members of the Canadian Chito Ryu Karate Do Association and have completed and signed Individual Tournament Registration Forms. In the case of applicants less than 18 years of age, Individual Tournament Registration Forms have been signed by a parent or legal guardian.

Dojo Head's Signature _____

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