



# Kyo Rin Shotokan Karate-Do Association<sup>®</sup>, India

MEMBER : AMERICAN JKA INTERNATIONAL

(Kyo Rin) Registered in : Govt. of India, Ministry of Micro Small & Medium Enterprises  
(UDYAM-PB-01-0002975)

## BELT GRADING EXAMINATION REGISTRATION FORM

NAME OF CANDIDATE : \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ AGE \_\_\_\_\_ MALE/FEMALE \_\_\_\_\_

ADDRESS: \_\_\_\_\_

MOBILE NO. \_\_\_\_\_

SCHOOL/COLLEGE NAME: \_\_\_\_\_

DATE OF JOINING: \_\_\_\_\_ REGISTRATION NO. \_\_\_\_\_

PERIOD OF PRACTICE: \_\_\_\_\_ PRESENT BELT: \_\_\_\_\_

LAST CERTIFICATE NO.: \_\_\_\_\_ DATE OF ISSUE \_\_\_\_\_

ACADEMY NAME: \_\_\_\_\_ INSTRUCTOR NAME \_\_\_\_\_

APPEAR BELT: 1.	_____	Fees: _____
2.	_____	Fees: _____
3.	_____	Fees: _____
4.	_____	Fees: _____

### DECLARATION:

Total Fees: \_\_\_\_\_

I hereby to abide by the rules and regulations of the KYO RIN SHOTOKAN KARATE DO ASSOCIATION, INDIA. I will be loyal and will not go against the Association on any grounds. In case of misconduct or violation of the rules and regulations of the Association reserving the right to withdraw my grade without assigning explanation reason.

Place : \_\_\_\_\_

Date : \_\_\_\_\_

Signature of Parents

Signature of Applicant

Signature of Instructor

#### For Office Use

Final Result : PASS/RETEST/FAIL \_\_\_\_\_ EXAMINATION DATE: \_\_\_\_\_

Registration No. \_\_\_\_\_ Belt Kyu/Dan \_\_\_\_\_ Date of Issue \_\_\_\_\_

Signature of Examiner

Signature of Chief Instructor

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