



KASSIDO

A MARTIAL ART INDIA

UNDER: KARATIANS EDUCATIONAL & CHARITABLE TRUST (REGD.)

Membership Application

Affiliation for Dojo/District/State (Please Tick)

Personal Information

Name _____

Gender _____ Contact Number _____

Address _____

District _____ State _____

Email Address _____

Martial Arts Information

Martial Art Style _____

Title if any _____ Do you have your own Dojo or School? _____

Dojo Address _____

How many? _____ Number of students _____

Your current grade or rank _____ Designation _____

Signature _____

Date _____ Place _____

Please attach a photo of yourself, a copy of your current Grading certificate and a copy of your logo.

Photo