

Dist.Darjeeling Branch

Affiliated With: All Japan Shito-Ryu Seiko Kai Karate-Do International (Japan) Officially Approved By: Karate Association of India (KAI) & Karate-Do Association of Bengal (KAB) Member: JKF, WKF, AKF, SAKF, & DGKA Recognized By: BOA, IOA, IOC & Govt. of India (Ministry of Sports & Youth Affairs)



Grand Master Soke Seiko Suzuki 9th Dan (Japan)

Master Shihan Akira Sato 8th Dan (Canada)

International Co-Ordinator Shihan Wim Tewinkle 6thDan (Canada)

Chief Instructor-India Shihan Bharat Sharma 7th Dan JAPAN, WKF & NF

Chief Instructor Dist.Darjeeling/G.T.A Sensei Sushan Thapa 4th Dan JAPAN, WKF & NF

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APPLICATION FOR THE TEST OF KYU/DAN	
NAME OF THE APPLICANT	
ADDRESS	Photo
DATE OF BIRTH PRESENT DOJO	
NAME OF THE INSTRUCTOR	
REGISTRATION NUMBERBLOOD GROUP	
DATE OF LAST CERTIFICATION (Enclosed Certificate)PRESENT GRADE/BELT	
DETAILS OF THE TOURNAMENTS / CAMPS ATTENDED	-
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Rules and Regulations

- I / My ward hereby undertake that the above mentioned information is true and correct to the best of my knowledge and no information 1. has been willingly altered or cancelled.
- 2. I/My ward undertake to abide by the decision of Sensei Sushan Thapa(Dist.Darjeeling) & Shihan Bharat Sharma, Technical Director, All Japan Shito - Ryu karate Do Seiko Kai International (India) regarding eligibility to appear for the test.
- I/My ward understand that the Technical Director's decision will be binding and no reasons, whatsoever, shall be provided to the 3. applicant / guardian regarding acceptance / rejection of the application.
- I / My ward also understand that acceptance of this application do not imply / guaranteed success in the test. 4
- I/My ward promise to pay the required test fee, as informed, before the date of the test; this fee not being refundable under any 5.
 - circumstances. I/My ward also promise to take part in all the activities conducted under the banner of my karate school All Japan Shito - Ryu Karate
- 6. Do Seiko Kai International (India). 7. If I / My ward fail to abide by the rules mentioned above and the karate school's rules & regulation, I understand that the disciplinary
- action may be taken against me, including cancellation of my certificate, dismissal from the dojo / karate school, etc.

Place:

Date

I HAVE NO OBJECTION FOR THE ABOVE MENTIONED STUDENT APPEARING FOR HIS / HER TEST.

Signature of student / Guardian

Signature of Instructor

For Official Use

Final Result -- Pass / Retest / Fail

Certificate number issued:-