₹150/- Sushan's Karate-Do Academy



Name of the Applicant

Date of Birth

Affiliated with: Kalimpong District Karate-Do Association & Seiko Kai Karate-Do International (India) Officially Approved By: Karate-Do Association of Bengal(KAB) & Karate India Organization (KIÒ)

Head Office:Dr.B.L Dixit Road, Kalimpong-734301, Phone No. +91-9933423098/7076766302 E-mail:sushankarate@gmail.com, Website: www.sushankarateindia.org



Blood Group

Paste recent
Passport Size
Photograph

Sex: M

Mobile

Addr	ess		
Scho	ool's Name	Class	
Fath	er's Name	Occupation	
Offic	e Address		
Offic	e Telephone No	Mobile	
Do ye	ou have an <mark>y police r</mark> ec	ord if yes give detail?	
Do ye	ou suffer <mark>any ailm</mark> ent?		
		RULES & REGULATIONS	
course of	course of Karate Training/Championship/demostration or any other activity of Karate.		
3. Student m (Sparring)	-	pments approved by WKF / National Federation during the time of Kumite	
\ .\ \ ~,			
	-	arate skills without the permission of Chief Instructor/Dojo Instructor.	
		DECLARATION	
•		information are true to the best of my knowledge. I/my s/d/w shall abide Dojo.I also understand that Academy/Dojo has the right to	
	•	Academy/Dojo if I/my s/d/w found involved in any criminal/civil offense or prestige and dignity of Karate-Do.	
Place		Signature of Applicant	
Date		Signature of Parent/Guardian (in case of Minor)	
		For Official Use	
Registration No).		
Date of Joining		Name of Dojo	

Signature of Chief Instructor/Dojo Instructor