#_____

International Isshin Ryu Karate Federation

Membership Application

Name _____ Date of Birth _____

Address _____

_____

Telephone _____ Email _____

How did you hear about the IIKF?

___ Website ___ Facebook ___ Personal Recommendation

___ IIKF Event ___ Other (please explain) _____

Mark as many that apply

___ Student (under black belt)
___ Black belt – Current Rank? _____Date of Promotion_____
___ Instructor
___ Head of a Martial Arts School

Primary martial arts style ___ Isshin Ryu Karate
___ Other – style name _____

Martial Arts School Name _____

Instructor (Sensei) Name _____

Are you actively training with your instructor at this time? ___ Yes___ No

Date of Application _____

Lifetime Membership fee for IIKF is $40 US - Includes membership certificate, IIKF Patch, and IIKF Passbook

For international memberships please add $10.00 for shipping costs

Payment method

Cash___Check or Money Order (made out to IIKF)___Credit Card___*Paypal___

Name on Card _____

Card Number _____CSC_____Exp_____

Please Mail or Fax To:

International Isshin Ryu Karate Federation
1512 Spencerport Rd
Rochester, NY 14606
(585) 429-6344
*info@iikf.org