

# REQUEST FOR DAN REGISTRATION

*For the purposes of clarity, all information must be typewritten. Handwritten forms will be returned.  
All registration forms must be signed by the Chief Instructor of the examinee's club to be accepted.*

Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Telephone( \_\_\_\_ ) \_\_\_\_\_ E-Mail \_\_\_\_\_  
Registering for \_\_\_\_\_ Dan Date of Examination \_\_\_\_\_  
Examiner \_\_\_\_\_ Instructor \_\_\_\_\_  
Instructor's Signature \_\_\_\_\_  
Club Name \_\_\_\_\_ Country \_\_\_\_\_ Region \_\_\_\_\_



## PERSONAL INFORMATION

Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Sex M \_\_\_\_ F \_\_\_\_ Height \_\_\_\_ ft. \_\_\_\_ in. \_\_\_\_ cm Weight \_\_\_\_  
Occupation \_\_\_\_\_  
Last School or College \_\_\_\_\_ Degree \_\_\_\_\_

## KARATE HISTORY

When did you begin karate practice? Year \_\_\_\_\_ Month \_\_\_\_\_

Previous Dan Registrations:

<u>Date of Exam</u>	<u>Reg. No.</u>	<u>Date of Exam</u>	<u>Reg. No.</u>
Sho (1) Dan _____	_____	Go (5) Dan _____	_____
Ni (2) Dan _____	_____	Roku (6) Dan _____	_____
San (3) Dan _____	_____	Shichi (7) Dan _____	_____
Yon (4) Dan _____	_____	Hachi (8) Dan _____	_____

REQUEST THAT MY RANK BE LISTED IN THE REGISTER OF THE INTERNATIONAL SHOTOKAN KARATE FEDERATION. I PROMISE TO UPHOLD THE STANDARDS AND HONOR OF THE ISKF.

Student's Signature \_\_\_\_\_

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## FOR EXAMINER'S USE ONLY

Rank Awarded \_\_\_\_\_ Examiner's Signature \_\_\_\_\_

Promotion by: (circle one) EXAMINATION RECOMMENDATION HONORARY  
Remarks: