

YEAR: _____



United Shotokan Karate Federation of Ireland

Licence Application Form

(Please complete in block capital letters)

CLUB: _____

INSTRUCTOR: _____

LICENCE: application/renewal * (Please delete as appropriate)

GRADE: _____ KYU/DAN * (Please delete as appropriate) or tick here if this is first licence application.

PRINT NAME: _____

PRINT ADDRESS: _____

_____ **POSTCODE:** _____

D.O.B: ____ / ____ / ____

TELEPHONE: _____ **MOBILE:** _____

EMAIL ADDRESS: _____

DECLARATION – I certify that to the best of my knowledge & belief, the information given in this application is correct. If accepted as a licence holder of the United Shotokan Karate Federation of Ireland, I agree to abide by the rules and regulations together with any amendments made during the time of my licence.

SIGNATURE: _____

****LICENCES MUST BE RENEWED EVERY JANUARY. ALL MEMBERS MUST HAVE A CURRENT, VALID LICENCE TO PARTICIPATE IN ALL ASSOCIATION EVENTS.**