

# IKO KYOKUSHIN INDIA

**AFFILIATED TO : IKO KYOKUSHIN WORLD WAY**

DOJO .....



Date: .....

## ADMISSION FORM

NAME (BLOCK LETTER) : .....

FATHER/ MOTHER NAME : .....

PRESENT ADDRESS : .....

PERMANENT ADDRESS : .....

AGE : ..... SEX : ..... QUALIFICATION : .....

TELEPHONE NO. : .....

I fully understand all rules and regulations of IKO kyokushin India and I promise the same I declare that I will be solely responsible for any injury to my person caused training. I understand fully well that no Club/Etc. can be formed without consent of the Chief Instructor.

### For Office Use

Joining Date	:	Signature of the
9 <sup>th</sup> kyu	:	Student in full
8 <sup>th</sup> kyu	:	.....
7 <sup>th</sup> kyu	:	Signature of the
6 <sup>th</sup> kyu	:	Guardian in full
5 <sup>th</sup> kyu	:	.....
4 <sup>th</sup> kyu	:	.....
3 <sup>rd</sup> kyu	:	.....
2 <sup>nd</sup> kyu	:	.....
1 <sup>st</sup> kyu	:	.....
Sho-Dan	:	.....

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## **IKO KYOKUSHIN INDIA**

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