

Association Canadienne de Karaté Canadian Karate Association

Application for individual members / Enregistrement pour membre

	CKA Membership - Colored Belt CKA Application -Ceintures de couleur (\$40/ year)		CKA A	oplica	rship - Black Bel tion - Ceinture lifetime)	Insurance - BlackBelt Assurance -Ceinture noire (\$100/year)	
Name:						Gender: M F	
Address:					Postal Code:		
Email:						Telephone:	
Instructor's Name:					Level / Niveau:		
The payment is made to the attention of the "Canadian Karate Association". Identify on your cheque for what you are paying. The fee covers the Karate Passport, insurance, provides discounts for clinics, and pays for guest instructors. A fee of \$45 will be charged for all non-funded or refused cheques. No refunds will be made. Belt Certification Dates / Date de diplôme:							
6e	Kyu (white):	Shodan:				Shichidan:	
5e	Kyu (yellow):	Nidan:				Hachidan:	
4e	Kyu (orange):	Sandan:				Kyudan:	
3е	Kyu (green):	Yodan:				Judan:	
2e	Kyu (blue):	Godan:				Others:	
1e	Kyu (brown):	Rokudan:					
If you have other certifications, please detail them on the <u>back of the page</u> .							
Medical Information (check the ones that apply and provide details on the back of the page)							
Α	Do you suffer any visual disorders?			Н	Do you suffer fro	you suffer from any muscle weakness?	
В	Do you have any hearing problems?			I	Do you have diabetes?		
С	Do you have any fainting problems?			J	Do you have any contagious skin disorders?		
D	Do you have epilepsy?			K	Have you had any major surgical interventions lately?		
Е	Do you have any cranial or neurologic disorders?			L	Do you have asthma or other breathing disorders?		
F	Do you suffer from any kidney disorders?			М	Do you have any severe allergies or carry an epipen?		
G	Do you have any limitations in your limbs, back, or spinal cord.			N	Do you have any other illness or infection other than those mentioned?		
,	Applicant Signature	Date	Inst	tructo	r Signature	Date	