

| |
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| No. |
| Date |

AIKIKAI FOUNDATION

APPLICATION FORM FOR ENROLLMENT IN AIKIKAI

↑ Aikikai Use

Please Print or Type

(First Name)

(Family Name)

Name*:

English alphabet

Date of Birth: dd/Mmm/yyyy **Age:** **Nationality:** **Sex:** M / F

Address:

Name of Org. or Grp.:

Name of Dojo:

Name of Dojo Representative

Signature:

Date: dd/Mmm/yyyy

*Write your name in CAPITAL LETTERS as you want it to appear on your diploma. Please add 'English' alphabet under your name.

*Successful Sho-dan applicants must become a member of the Aikikai Foundation by registering with this form.

FORM-2

111201

For Aikikai Use

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| 証書番号 |
| 有段者証No. |
| Date |

AIKIKAI FOUNDATION

AIKIDO WORLD HEADQUARTERS

APPLICATION FORM FOR AIKIKAI INTERNATIONAL YUDANSHA BOOK

For Aikikai Use

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|------|
| 会員番号 |
| 入会日 |

(First Name)

(Family Name)

Date:

(dd / Mmm. / yyyy)

Name*:

English alphabet

Date of Birth: (dd / Mmm. / yyyy) **Nationality:** **Sex:** Male / Female

Address:

Name of Organization or Group:

Name of Org.or Grp. Representative:

Name of Dojo:

Name of Dojo Representative:

*Write your name in CAPITAL LETTERS as you want it to appear on your diploma. Please add 'English' alphabet under your name.

※Successful Sho-dan applicants must obtain an AIKIKAI INTERNATIONAL YUDANSHA BOOK by registering with this form.

※For reissuance of Yudansha Book please use this form and provide your Aikikai Membership No.

No.

and Yudansha issue No. A -

FORM-3

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