

Initial & Annual

NKJF Member Fee: \$25.00

National Karate Jujitsu Federation

USA-INTERNATIONAL®



(財)全米空手柔術連盟

国際武道連盟

NKJF Member #:__Click

(Please Print Legibly)						
Application is for:	Instructor:			Student:		
First Name:						
Middle:						
Last:						
Dr., Sr., Jr., II, III						
Date of Birth:			Age:			
Home Address:						
Dojo Name:						
Dojo Address:						
Country:						
Dojo Website:						
Best Email:				Best Phone #		
Emergency Contact Name:			Emergenc	y Contact Phone	:	
Current MA System 1:				Rank	:	
Current MA System 2:				Rank	:	
Current MA System 3:				Rank	:	
Current Kobudo System:				Rank	:	
Other 1:				Rank	:	
Other 2:				Rank	:	
Other 3:				Rank	:	
Current MA Title:						
Current Kobudo Title:						
Current Instructor's Name 1: (If Applicable)						
Current Instructor's Name 2: (If Applicable)						

AGREEMENT

I, the undersigned, do hereby agree to abide by all rules, regulations, and policies, in principle, as set forth by the National Karate Jujitsu Federation (NKJF), USA-International, LLC, as well as any NKJF-appointed instructors/officers. I do hereby agree to follow the rules of conduct, to keep self and students safe, whether I am giving or receiving instructions. Should an incident occur while receiving or providing instruction, I release NKJF, its instructors, officers, agents, representatives, and students from any responsibility for said incident.

As a member of National Karate Jujitsu Federation, (NKJF), USA-International, LLC I will continue to strive for knowledge and the strengthening of my martial art, as it might prove beneficial to me and fellow students. Their well-being, interest and safety will remain in my efforts. In addition, I do agree to share my knowledge and expertise with others in NKJF, USA-International LLC. Should I decide to remove myself from NKJF, USA-International, LLC, an explanation will be provided verbally or in writing to the Regional Director, State Director, or NKJF President/Director.

I do certify that the information provided is true and accurate to the best of my knowledge.

Applicant Signature: _____

Parent/Guardian Signature: _____Date: _____Date: _____

Payment Options: Venmo (@NKJF-Kaicho) | PayPal | Money Order | Bank Check | Personal Check

Date:

INSTRUCTOR'S AFFIRMATION

As the instructor, I have verified the aforesaid information and found it to be true and accurate.

Signature:	Date:
Social	l Media Sites
Facebook: http://	
Instagram: http://	
Twitter: http://	
LinkedIn: http://	

Along with your application, please submit a copy of your highest rank(s) of the system/style you will be representing for NKJF, as well as a well-developed photo of the patch/logo that represents your dojo, system/style.