## **AIKIDO ASSOCIATION OF AMERICA**

**Kyu Test Application** 

## \*PLEASE PRINT CLEARLY AND COMPLETE ENTIRE FORM\*

I hereby apply to	take the p	romotion test	for the rank of KYU
Check one: Adult	Teen/C	hild Make	eup Test
NAME:			TEST DATE:
STREET ADDRESS:			
CITY/STATE/ZIP:			OCCUPATION:
PHONE (HM):			E-MAIL:
DATE OF BIRTH:		EMBERSHIP NUMBER:	
Name of DOJO to which	ch you belon	g:	
Your present rank is _	kyu	ı, and was obtain	ed at
dojo on/	/	<u>.</u>	
Applicant's signature:			
Belt Size:	Today's date:		
DOJO-CHO/INSTRUC			DATE:
SIGNATURE			DATE:
Please provide us with your test requirements		AAA seminar, sur	nmer camp or instructor's seminar you attended if it is part of
AAA Seminar Date:			AAA Summer Camp Date:
AAA Instructor's Semir	nar Date:		
SPACE BELOW THIS	LINE FOR C	FFICE USE ONL	_Y
	Amount	Date	Dues and test fees payable to AAA
Dojo fee paid			Test result: PASS FAIL
AAA dues paid			☐ PROBATION
Test fee paid			
TOTAL		Received by:	Certificate issued: Kyu
cash/ ck/ chg			Date made:/ Initials:
check number			
Examiner's signature:			Date: /
Officer's signature:			Date: /