



KenBuKai e.V.

Membership Application Form

Dojo, Club or Training Group: _____

Contact Person,
Trainer or Director: _____

Street: _____

Post Code, City: _____

Tel.: _____

Fax: _____

Email: _____

Website: _____

I have read the following terms and conditions:

I will promptly notify KenBuKai e.V. of any changes in my/our dojo or club details in writing.

I will submit the membership list for each year by the end of February.

A digital passport picture must be submitted for each dojo or club member listed.

Notice of withdrawal from KenBuKai e.V. must be made in writing.

Each dojo or club member listed will receive a membership card.

Date: _____

Signature: _____

Enclosed: Membership List Template