

Registration is free

Please fill in the application form below and send it back by E-mail (kijutsudoacademy@gmail.com). Please type in all the information. (No Hand Writing except Applicant Signature)

ORG	ANIZATION						
A.	COUNTRY						
B.	REFERENTIAL MASTER						
C.	PRACTICED STYLE						
D.	PRACTICE YEARS						
E.	GRADE /BELT						
PER	SONAL						
1.	NAME						ID photo
2.	CATEGORY						
3.	NATIONALITY						
4.	BIRTHDAY						
5.	AGE						
6.	SEX (Male or Female)						
7.	TEL.						
8.	FAX						
9.	ADDRESS						
10.	E-MAIL						
I would like to participate to the Championship. I swear to obey all rules and to not bring disgrace on the organization.							
			please hand write your Signature				
Date	Year Month	Day					