

# Examinee's information card

(Fill in the items below completely)

Name			
Address	Country		
	State /Zip		
	Street		
	Phone		
Birth Date	year:	month:	date: age:
Organization Name (that you belong)			
Registration Number	( )Regular		
	( )Permanent		
Rank of Dan	Dan	acquisition date : year    month    date	
		Registration number :	
Holding License (currently)	Instructor	Exainer	Judge
Testing License	Instructor	Exainer	Judge
	A	A	A
	B	B	B
	C	C	C
	D	D	D
Kata:			
***** (For the administration only)			
Judgement			
Authorize Number			
Exam Fee			
Registration Fee			
Note			