



# 国際武道院・国際武道連盟

KOKUSAI BUDOIN, IMAF  
INTERNATIONAL MARTIAL ARTS FEDERATION  
WORLD HEADQUARTERS, JAPAN

## Membership Application Form

paste 1 photo here  
attach 3 more with  
the application  
form

Please type or print carefully. Forward the completed application form, 4 recent passport size photos, copies of your most recent certificate(s) of rank and any other relevant documents to the regional IMAF representative. See Contact Info at [www.imaf.com](http://www.imaf.com).

### Contact Information

Date of Birth: \_\_\_\_\_  
(yyyy/mm/dd)

Name: \_\_\_\_\_ Male/Female  
(family) (given)

Address: \_\_\_\_\_  
(street) (city, state/province, postal code) (country)

Nationality: \_\_\_\_\_ Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Membership Level:  Regular  Associate  Affiliate

### Education & Professional Background

Education Received: \_\_\_\_\_

Occupation: \_\_\_\_\_ Years in Profession: \_\_\_\_\_

### Martial Arts Background

Total Years of Study: \_\_\_\_\_ Member of Club/Dojo: \_\_\_\_\_

Primary Style(s): \_\_\_\_\_

Current Rank(s) and Issuing Organization(s): \_\_\_\_\_

Application Recommended by: \_\_\_\_\_

### Division

Judo  Kendo  Karatedo  Aikido  Iaido  Nihon Jujutsu  Kobudo

I hereby certify that the information contained in this application is true and accurate to the best of my knowledge,

\_\_\_\_\_  
applicant's signature date (yyyy/mm/dd)

Name in Japanese Katakana: \_\_\_\_\_

OFFICIAL USE ONLY, PLEASE DO NOT WRITE IN THIS SECTION

Application reviewed by: \_\_\_\_\_  
name / 氏名 date / 年月日