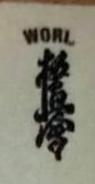


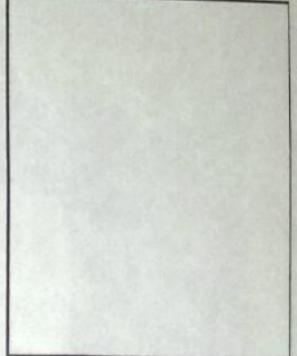
## DELHI KYOKUSHIN-KAI KARATE ASSOCIATION



WORLD KYOKUSHIN-KAI KARATE ORGANIZATION - JAPAN

WKKO Registered By Govt of Japan, Defence Ministry Japanese Ministry of Education Culture Sports 0001, Science and Technology,





## **PARTICIPANT DETAILS**

NAME OF PARTICIPANT (Blo	ck Letter)Contact No
DOJO NAME	FATHERS /
NAME PRESENT ADDRESS	CITY
PERMANENT ADDRESS	WKKO DOJO
GRADE WEIGHT	D.O.B
FEE	BLOOD GROUP
DATE	PARTICIPANT SIG GUARDIAN'S SIG
NSTRUCTOR NAME	********

COMPETITION ENROLLMENT

- I fully understand all the rules and regulations DKKKA & WKKO I promise to obey the same. I declare that I will be solely responsible for any injury to my person caused during training.

## OFFICE USE

DATE	FEE PAID	YES	NO
INSTRUCTOR S	IG	INSTRUCTOR NAME	
COMPETITION	CATEGORY		