REGULAR KYU GAI (Novice) & MUDANSHA (KYU -Class) APPLICATION FOR UMAAI MEMBERSHIP PERMISSION SLIP AND WAIVER OF LIABILITY . "**NOTE**" ALL SPACES **MUST** BE FILLED IN. IF YOU DO NOT PRINT IN ENGLISH AND IF YOU DO NOT FILL IN ALL SPACES, **THE APPLICATION WILL AUTOMATICALLY BE REJECTED**.

United Martial Arts Association International
Post Office Box 8252
Glendale, California 91224 USA

YOU MAY PHOTOCOPY THIS APPLICATION

PLEASE PRINT IN ENGLISH: YOU MUST FILL IN ALL BLANKS. A NEW APPLICATION MUST BE SUBMITTED EACH YEAR WITH UPDATED. INFORMATION AND UMAAI ANNUAL FEE of (US). **PLEASE ALSO INCLUDE A PHOTOGRAPH OF YOURSELF. A Photograph Would Be Good To Appear on Your Kyu I.D. Card. "However" Photographs of Novice and Kyu Ranked Students are not absolutely Necessary! PRINT, PRINT, PRINT.

Your Birth date Month Day Year
Today's Date
Amount of UMAAI Annual Fee Paid
UMAAI Number (to be assigned by Hombu)
UMAAI Member Club Name .
Your Home Phone Number
Last Name First Middle Age
Home Address City State
Country Zip Sex Weight (pounds) Height Feet Inches Color Eyes
Do you have any Physical or Mental Impairments ?
When Did You Start Training in Martial Arts? Who Was Your Teacher?
What was your Teacher's Rank and Style? Do you still train with your Original Teacher? Yes No
If No, Why Not?
Are you on medication? For What?
Do you know of any reason why you should not train in Karate (Martial Arts) and/or Any Physical Activity Related thereto?

Name of Martial Arts Club you belong to
Club Address City State Zip
Club Phone Club's Head Instructor His/Her Rank?
His/Her Instructor's Name & Rank
Your Present Rank Your Martial Art (Complete Name)
Style of your Martial Art How long have you been training? Issuer of Your Present Rank (Person and his or her Rank)
Through What Organization?
Organization's Address City State Zip

****

MEMBERSHIP RELEASE AGREEMENT

In consideration of my (or my child's) application for membership in United Martial Arts Association International or any of its Subsidiaries or Branches, including this Club, I (we) do hereby solemnly pledge to abide by all association policies, procedures, ethics, standards, dress codes, Dojo Etiquette, Rules and Regulations which have been established for the good of all members. I (we) further release this Club, its employees and/or representatives, the United Martial Arts Association International, its representatives, instructors, officers, agents, employees, and members from any and all liability with regard to claims, judgments or demands from any and all damages arising from accidents, injuries or diseases sustained in the practice of the Martial Arts or any activity related thereto or the traveling to and from any activity in connection with this Club, its employees and/or representatives, the United Martial Arts Association International, or any of its member clubs, it representatives, instructors, officers, agents and members. I (we) certify that I (we) have knowledge of my (our child's) physical and emotional health and physical condition; and certify that I am (he/she is) physically and emotionally fit, having no known physical or emotional defects, disease(s) or disability(s) that may jeopardize me (my/our child) or other children and/or adults that I (my/our child) may come in contact with while participating in any physical activity. I (we) further certify that I (my/our child, as named and described above, has my/our) consent (and permission) to participate in the Active Programs and/or Martial Arts Programs as presented by this Club through the United Martial Arts Association International, its representatives, instructors, officers, agents and members. In consideration of my (our child) being permitted to participate in these programs, I (we) agree to indemnify and hold harmless this Club, its employees and/or representatives, the United Martial Arts Association International, and/or any of its member clubs, its representatives, instructors, officers, employees, agents and members from any and all liability which may result in any accident, injury, disease or mishap arising out of or in any way connected with these programs. I (we) certify that the information contained herein is true and correct. I further agree to let UMAAI use my photograph and/or likeness in any manner to publicize UMAAI, or any of its member clubs, its representatives, instructors, officers, agents, members and/or events.

Sport Shirt Size _____ Jacket Size _____ Tee Shirt Size_____ Ring Size_____ Dogi Size _____ Blazer Size _____ Dress Shirt Size _____

Signature of Student Date
Parent or Legal Guardian MUST Sign Here Date
(Signature of Parent or Guardian required if Student is not of legal age. Signature will be verified by Club Head Instructor.)

****

Date of Testing Month/Day/Year	Rank Passed To	Tested By	List Kata You Know For Each Rank (This MUST be filled out)
_____	**Kyu Gai Novice White Belt**	**N/A**	
_____	**Jukyu 10th Class White Belt**		
_____	**Kukyu Ho 9th Class Yellow Belt Apprentice**		
_____	**Kukyu 9th Class Yellow Belt**		
_____	**Hachikyu Ho 8th Class Gold Belt Apprentice**		
_____	**Hachikyu 8th Class Gold Belt**		
_____	**Nanakyu Ho 7th Class Orange Belt Apprentice**		
_____	**Nanakyu 7th Class Orange Belt**		
_____	**Rokukyu Ho 6th Class Green Belt Apprentice**		
_____	**Rokukyu 6th Class Green Belt**		
_____	**Gokyu Ho 5th Class Blue Belt Apprentice**		
_____	**Gokyu 5th Class Blue Belt**		
_____	**Yonkyu Ho 4th Class Purple Belt Apprentice**		
_____	**Yonkyu 4th Class Purple Belt**		
_____	**Sankyu 3rd Class Brown Belt**		
_____	**Nikyu 2nd Class Brown Belt**		
_____	**Ikkyu 1st Class Brown Belt**		

****

FOR CLUB HEAD INSTRUCTOR ONLY: I, _____, Head Instructor for this Club, do hereby attest that to the best of my knowledge, the above information is true, that I have personally called the Individual's Parent (if applicant is a minor) and verified the Parent's signature. I have answered all questions asked by the Individual and/or Parent concerning the Martial Arts Programs/UMAAI and I find that the above named individual is of good moral character and this student's Parent is in full agreement for the Student (if applicant is a minor) to participate in the Martial Arts Program.
Signed on (Date)_____ by:_____ (Use Back For Additional Comments)