

Aikido Tanren Juku - Member of Canadian Aikido Federation Membership Application

Updated October 2006

Please complete form, and return with payment. Make cheques for fees payable to Aikido Tanren Juku, for CAF Membership payable to Canadian Aikido Federation. Please print clearly and legibly.

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| Name _____ <div style="display: flex; justify-content: space-around; width: 100%;"> Last First Middle </div> | | |
| Birth Date _____ (m/d/y) | | Start Date _____ |
| Gender <input type="checkbox"/> Female <input type="checkbox"/> Male | | |
| Age Group <input type="checkbox"/> Adult <input type="checkbox"/> Student (College/University) <input type="checkbox"/> Youth (Jr. & Sr. High) <input type="checkbox"/> Child (ECS & Elementary) | | |
| Address _____ _____ City _____ Province _____ Postal Code _____ | | Phone Home _____ Business _____ Cell _____ Email(s) _____ |
| Emergency Contact <input type="checkbox"/> As below Name _____ Relationship _____ Phone _____ | | Disabilities or Health Concerns _____ _____ |
| If under the age of 18 | | |
| Mother _____ (or legal guardian) | | Father _____ (or legal guardian) |
| Phone Home _____ Business _____ Cell _____ | | Phone Home _____ Business _____ Cell _____ |
| Additional information: _____ _____ _____ | | |