

Recent Photo



Membership Number:



# INDIVIDUAL MEMBERSHIP APPLICATION

Name \_\_\_\_\_  Female  
First name Middle name Surname  Male

Address \_\_\_\_\_ Suburb \_\_\_\_\_

State \_\_\_\_\_ Postal/Zip Code \_\_\_\_\_

Phone (H) (\_\_\_\_) \_\_\_\_\_ Phone (W) (\_\_\_\_) \_\_\_\_\_

E-Mail/Website \_\_\_\_\_ Birth date \_\_\_\_/\_\_\_\_/\_\_\_\_

Martial Arts \_\_\_\_\_  
Experience \_\_\_\_\_  
\_\_\_\_\_

Please list what styles you have studied, your rank in them with the day that rank was achieved, your instructors name & rank as well as the total time training in each style.

How did you find the Alliance?  Internet  Newspaper / Magazine  
 Master Booth / Other Instructor  Yellow Pages  
 Other: \_\_\_\_\_

*I, the undersigned, on consideration of, and a condition of acceptance of my entry into the above alliance for myself, heirs, executors and administrators, hereby waive all and any claims, fight or course of action, which I or they might otherwise have, arisen out of any loss of life or injury, damage or loss of any description whatsoever which I may suffer or sustain in the course of or consequent upon entry or participation in the said Alliance. I also understand that the activities that I am undertaking can by their nature be dangerous, and I assume the risk.*

*This waiver, release and discharge shall be and operate separately in Favour of all persons, corporations and bodies involved or otherwise engaged in promoting the group and the servants, agents, representatives, and officers of any of them.*

*I hereby apply for membership to International Hapkido Alliance and agree to abide by the rules of the Alliance.  
(If you are under 18, your parent or guardian must sign)*

Signature \_\_\_\_\_ Date \_\_\_\_\_