World Shito-Ryu
Karate Do Seishinkai International
世 界 国 際 糸 東 流 空 手 道 聖 心 会
Soke　Sadatomo Harada
President Hanshi　Md Nurul Elahi
Email:world_sksi_president_elahi@yahoo.com
Website: **http://ysielahi.shisyou.com/en/**

Flag
"Country"

APPLICATION FORM FOR
DOJO REGISTRATION

Please send by Fax or Scan　and send by e-mail

Photo
Passport Size

Name and Address of Head-Instructor:		Address of your Dojo/Business:	
First Name		Name of Dojo	
Last Name		Street	
Street		City / ZIP	
City / ZIP		District	
Country		Country	
Phone		Phone	
Fax		Fax	
Cell		E-mail	
E-mail		Website	

Information about your Dojo(s):		Current membership in other Karate bodies:	
Number of dojos:		a)	
Number of students:		b)	

Credentials of Head-Instructor:		Karate started in what year:	
Your current Rank:		In what country:	
Date of exam:		Under what Karate style:	
What Karate style:		Head of this style:	
Given by Master:		Name of your local teacher:	

Supporting Documents:	
❒ 1 Photo (passport format)	❒ Statutes/Regulations of your dojo (if any)
❒ Curriculum vitae (Head Instructor)	❒ Annual Fee for Dojo-Registration paid

I confirm that the information given is true and accurate:

Date: _____   Signature: _____