WTKF
GOVERNING BODY OF TRADITIONAL KARATE

WORLD TRADITIONAL KARATE-DO FEDERATION

NATIONAL FEDERATION (NF) MEMBERSHIP REGISTRATION

YEAR: ____

_____ **NEW NF- $100 Initial Fee plus Renewal Fee**
_____ **RENEWAL ($500 per year) (NF No. _____)**

I. NF Information

Name of NF: _____
Mailing Address: _____
City: _____ State: _____ Zip: _____
Telephone: _____ Fax: _____ E-mail: _____
Physical Location of Office: _____
City: _____ State: _____ Zip: _____
Telephone: _____ Fax: _____ E-mail: _____

II. Type of NF (Please select):

_____ Non-Profit Corporation _____ Profit Corporation _____ Unincorporated

III. Officials:

A. NF Director (or President)
Name: _____
Title: _____
Address: _____
Telephone: _____
E-Mail: _____

B. Chief Technical Official:
Name: _____
WTKF Technical Qualification: (Please Check Appropriate Box)
_____ Dan Ranking Rank: _____ Reg.#: _____
_____ Judge (Kumite) Class: _____ Reg.#: _____
_____ Judge (Kata) Class: _____ Reg.#: _____
_____ Coach Class: _____ Reg.#: _____
_____ Ranking Examiner Class: _____ Reg.#: _____

IV. Style:

Name of Style (If a national or international organization) _____
Name of Organization: _____
Address: _____
City: _____ State: _____ Zip: _____
Telephone: _____ Fax: _____ E-mail: _____
Name of Instructor: _____

V. Current Number of Active Clubs: _____
Total Number of Registered Members: _____

_____ _____
Date Signature of NF President