For Aikikai Use							
Certificate No.							
Grade Given	AIK]	[KAI F	<b>OUNDATI</b>	ON	Rank App	lied for	Attendance after
Dan	AIKID	O WORL	D HEADQUART ijuku-ku, Tokyo 162-0	ERS		_	Present Rank
Kyu			ijuku-ku, Tokyo 162-0 N FORM FOR	US6 JAPAN		Dan Kyu	obtained Days
			N FORM FOR IG EXAMINAT	IONS		Ryu	Days
	Aikikai Membe		Date of Aikikai		Nati	onality:	
Please Print or Type First Name*	pe No.	Family Nam	Registration:		Det	a of Disth	. Cour
FIRST Name*		Family Nam	ne"		Date	e of Birth	n; Sex: □ <sub>Male</sub>
English Alphabet							□Female
Address:					(country)		
Name of Dojo:			Name of Org. or	Group			
Present Rank Inform		Obtained, Da	te)		Date of E	Examinat	tion
Rank: Dan/ <i>Kyu</i>	Place:		Date:				
Remarks:		Examiner'	's Name:				
Kemarko.		Examiner	3 Name.				
		(print)		(signatur	re)		
I hereby make my a	pplication.			Examination	n Fee		
Date:	Signature	<b>:</b> :		Registratio	n Fee		
For Aikikai Use Certificate No.	ΔΤΚΊ	IKAT F	OUNDATI	ON			
Grade Given Dan					Rank App	lied for	Attendance after Present Rank
Kyu			<b>D HEADQUART</b> Ijuku-ku, Tokyo 162-0			Dan	obtained
Kyu	17-10 Wakaiii	atsu-cho Shin	ijuku-ku, Tokyo 102-0	OJO JAPAN		Dan	obtained
	AP	PLICATIO	N FORM FOR			Kyu	Days
	DAN/KYU	GRADIN	IG EXAMINAT	IONS		-	
	Aikikai Membe	rship	Date of Aikikai		Nati	onality:	
Please Print or Typ	pe No.		Registration:				
First Name*		Family Nan	ne*		Date	e of Birth	n; Sex: □ <sub>Male</sub>
English Alphabet							□ Male □ Female
Address:					(country)		Петине
Name of Dojo:			Name of Org. or	Grour			
,	ation (Doub Dlace	Ohtainad Da			D-16 [	Tua maim ad	bi a m
Present Rank Inform Rank: Dan/ Kyu	Place:	Obtained, Da	Date:		Date of E	<u>-xamilla</u>	LIOII
Remarks:		Examiner'	's Name:				1
		(print)		(signatur	re)		
				Evamination	n Foc	<u> </u>	
I hereby make my a	pplication.			Examination	лі гее		

INSTRUCTIONS: \*Write your name in CAPITAL LETTERS as you want it to appear on your diploma. Please add 'English' alphabet under your name.

Registration Fee

Signature:

Date:

1. **Applicants** fill in the boxes enclosed by a **heavy** line.
2. Please send your Yudansha Book when you apply.
3. *Examiners fill in boxes enclosed by a double line*. Do not forget your 'Signature'. The single line boxes are for Aikikai use.
4. Examination fees and registration fees are not refundable for any reason.
5. Do not change the size or shape of this form.

FORM-1 The Aikikai treats all information with the greatest care and in accordance with the laws on protection of personal information.

### **AIKIKAI FOUNDATION**

### **AIKIDO WORLD HEADQUARTERS**

APPLICATION FORM FOR

会員番号/ID#

入会日/DoE	ENKULLMENT	<u>IN AIKIKAI</u>			
	[	Date:			
↑ Aikikai Use			/Imm. / yyyy)		
		Please F	rint or Type		
Applicant's (First Na	ame) (Family Name)				
Name*:					
English alphabet					
		Sex:	Male		
Date of Birth:	Nationality:		Female		
Address:					
Name of					
ization or Group:					
Name of Daio					
Name of Dojo: Name of					
Dojo Representative:					
Applicant'					
S	singed Dates	(dd / Mmm. / yyyy)			
*Write your name in CAE	PITAL LETTERS as you want it to appear o		nalish' alphabet under vour		
•	ai cannot input other language letters:				
	plicants must become a member of the	•			
•	tion with the greatest care and in accordance with	· -	_		
THE AIRIKAI CIEACS AII IIIIOTTIA	tion with the greatest care and in accordance with	the laws on protection of personal in	140903		
会員番号/ID# 入会日/DoE	AIKIKAI FOU AIKIDO WORLD HE APPLICATION F ENROLLMENT	ADQUARTERS ORM FOR			
↑ Aikikai Use			1mm. / yyyy)		
	Please Print or Type				
Applicant's (First Na	ame) (Family Name)	1100001	1,750		
Name*:					
English alphabet					
			Male		
Date of Birth:	Nationality:	Sex:	Female		
Address:		<u> </u>			
Name of					
ization or Group:					
,					
Name of Dojo:					
Name of					
Dojo Representative:					
Applicant'					
S	stoped base:				
		(dd / Mmm. / yyyy)			

- \*Write your name in CAPITAL LETTERS as you want it to appear on your diploma. Please add 'English' alphabet under your
- name, since the Aikikai cannot input other language letters such as Cyrillic letters, Umlaut and Arabic, etc. -Successful 1st-dan applicants must become a member of the Aikikai Foundation by registering with this form.
- -The Aikikai treats all information with the greatest care and in accordance with the laws on protection of personal information.

FORM-2

For Aikikai Use	
証書番号	
士印書 NO	
有段者NO.	

#### For Aikikai Use

### AIKIKAI FOUNDATION AIKIDO WORLD HEADQUARTERS

会員番号/ID#	
入会日/DoE	

FORM-3

APPLICATION FORM FOR <u>AIKIKAI INTERNATIONAL YUDANSHA BOOK</u> Date: (dd / Mmm. / yyyy) Please Print or Type Applicant's (First Name) (Family Name) Name\*: English alphabet Male Date of Birth: Sex: Nationality: Female Address: Name of ization or Group: Name of Dojo: Name of Dojo Representative: \*Write your name in CAPITAL LETTERS as you want it to appear on your Yudansha-book. -Successful 1st-dan applicants must obtain an AIKIKAI INTERNATIONAL YUDANSHA BOOK by registering with this form. -For reissuance of Yudansha Book, please use this form and provide your Aikikai Membership No. and/or Yudansha issue No. A -The Aikikai treats all information with the greatest care and in accordance with the laws on protection of personal information. FORM-3 For Aikikai Use For Aikikai Use 会員番号/ID# 証書番号 AIKIKAI FOUNDATION AIKIDO WORLD HEADOUARTERS 入会日/DoE 有段者NO. APPLICATION FORM FOR AIKIKAI INTERNATIONAL YUDANSHA BOOK Date: (dd / Mmm. / yyyy) Please Print or Type (First Name) (Family Name) Applicant's Name\*: English alphabet Male Date of Birth: Sex: Female Address: Name of ization or Group: Name of Dojo: Name of Dojo Representative: Aikikai Membership No. and/or Yudansha issue No. A

-The Aikikai treats all information with the greatest care and in accordance with the laws on protection of personal information.

### For Aikikai Use Certificate No. Grade Given Dan Kyu

# AIKIKAI FOUNDATION AIKIDO WORLD HEADQUARTERS 17-18 Wakamatsu-cho Shinjuku-ku, Tokyo 162-0056 JAPAN

APPLICATION FORM FOR



Attendance after Present Rank obtained 200 Days

DAN/KYU (	GRADING	<b>EXAMINAT</b>	IONS			
Aikikai Member	ship	Date of Aikikai		Natio	onality:	
Please Print or Type No.		Registration:		ARC	GENTINA	
First Name*	Family Name*			Date	of Birth;	Sex:
JUAN	PEREZ			40	-oct-1970	<b>X</b> Male
English Alphabet					-UCL- 1970	Female
Address: LOCALI	DAD DE DONI	DE ES	(	(country)	ARGEN	TINA
Name of Dojo: NOMBRE DEL	DOJO	Name of Org. or		acion	aikido ar	gentina
Present Rank Information (Rank, Place C	Obtained, Date)			ate of E	xamination	
Rank: Place: Dan/ <mark>1</mark> <i>Kyu</i> <b>fundacion</b> a	aikido argentir	Date:			fecha exam	ien
Remarks:	Examiner's Na juan to (print)	me: lone shihan	(signature	)		
I hereby make my application			Examination	ı Fee		
Date: Signature:			Registration	Fee		

### **AIKIKAI FOUNDATION**

### **AIKIDO WORLD HEADQUARTERS**

会員番号/ID# 入会日/DoE

APPLICATION FORM FOR **ENROLLMENT IN AIKIKAI** 

Date: ↑ Aikikai Use

MISMA FECHA DE EXAMEN (dd / Mmm. / yyyy)

Please Print or Type

Applicant's	(First N	ame) (Fa	mily Nar	ne)			
Name*:				JUAN PEREZ			
English alphabet							
	EE	CHA NAC				Sex: □	Male
Date of Birth:	''	CHA NAC	Nationality:	ARGENTINA ARGENTINA		5	Female
Address:							
Name of		EUNDACION AIVIDO ADCENTINA					
ization or Gr	oup:	FUNDACION AIKIDO ARGENTINA					
			NOMBRE DEL DOJO				
Name of D	ojo:			NOMBRE DEL DOJO			
Name of				ELINDACION A	TVTI	O ADCENTINA	
Dojo Represent	ative:			FUNDACION AIKIDO ARGENTINA			
Applicant'							
S				Singed Date:			

For Aikikai Use	
証書番号	
有段者NO.	

### For Aikikai Use

## AIKIKAI FOUNDATION AIKIDO WORLD HEADQUARTERS

会員番号/ID#	
入会日/DoE	

APPLICATION FORM FOR AIKIKAI INTERNATIONAL YUDANSHA BOOK Date: (dd / Mmm. / yyyy) Please Print or Type Applicant's (First Name) (Family Name) Name\*: JUAN PEREZ English alphabet Male Date of Birth: Sex: FECHA DE NACI ARGENTINA Female Address: LOCALIDAD DE DONDE ES Name of FUNDACION AIKIDO ARGENTINA ization or Group: NOMBRE DEL DOJO Name of Dojo: Name of FUNDACION AIKIDO ARGENTINA Dojo Representative: \*Write your name in CAPITAL LETTERS as you want it to appear on your Yudansha-book. -Successful 1st-dan applicants must obtain an AIKIKAI INTERNATIONAL YUDANSHA BOOK by registering with this form.

-For reissuance of Yudansha Book, please use this form and provide your
Aikikai Membership No. No. A -

-The Aikikai treats all information with the greatest care and in accordance with the laws on protection of personal information.

FORM-3