

REQUEST FOR TOGKF DAN REGISTRATION



I hereby request that, upon successful completion of my grading, my rank be registered in the "Dan Register" of the Traditional Okinawa Goju Ryu Karate Do Federation.

Place your PHOTO in this box.

Note: You cannot be graded without a photo.

GRADING DATE / /
 dd / mm / yyyy

WRITE YOUR NAME IN KATAKANA OR IN JAPANESE SYLLABLES

PERSONAL INFORMATION

NAME _____ **TELEPHONE** _____
First Name Family Name Country Code City Code Number

E-MAIL _____ **MALE / FEMALE** *(Please circle)*

HOME ADDRESS _____

AGE _____ **DATE OF BIRTH** _____ / _____ / _____ **NATIONALITY** _____
dd / mm / yyyy

TRAINING RECORD

No. Of years in Goju-Ryu	Total years in Karate	Training hours per week	Present rank

Dojo name and address	Dojo Country

TOGKF GRADING HISTORY – (please fill in using this format dd/mm/yyyy)

Shodan	Nidan	Sandan	Yondan	Godan	Rokudan

TOGKF NATIONAL/INTERNATIONAL GASSHUKU RECORD-since your last grading (only 5 needed)

Date (dd/mm/yyyy)					
Location					

To be completed by your Sensei:

Sensei's name: _____

Recommended rank: _____

Has the candidate previously failed this grading? Yes / No
(Circle One)

To be Filled Out by Examiner

Grading Fee Paid: \$ _____

Results: Pass / Fail *(Circle One)*

Rank Awarded: _____

Examiner's Name: _____