

Budokan Karate – Do India (BKI)

Office: 8-3-320/1/3, Behind Sarathy Studios, Sai Sarathy Nagar, Ameerpet, HYDERABAD -500 073, INDIA Mob:09440052506. E-Mail:raoaibkf@gmail.com Member: Karate Association of India (KAI)

APPLICATION FOR AUTHORISED EXAMINER

To, The President / Secretary General, Budokan Karate-Do India.

I wish to apply for an Examiner of B.K.I. in the under mentioned capacity.

1. As an Authorised Examiner (General) at Grading Tests of Life Members of B.K.I. and for my name to be included in the List of Authorised Examiners.

OR

2. As an Examiner of my own students(who are Life Members of B.K.I. and have been receiving training from me at my Dojo/Dojos

Name :			
Sex : Male/Female	Date of Birth :	Nationality :	
Passport No(If Availa	ble). :	Adhar Card No :	
Residential Address :			
B.K.I. Life Membersh	ip No.:	Issue Date :	
(If not a life member accompany this applic		rm for Life Membership and the Life	e Membership fees must
Name of the Dojo :			-
Address of the Dojo :			
Present Rank(Dan) :	(Certificate No. :	
Certificate of Grade is (Name of the Karate C	J		
		nd regulations governing Examiner's structions by B.K.I. from time to time.	
Date: Place:			Signature
*		ne Bank a/c of All India Budokan Ka nch. IFSC: SBIN0003257 . A/c No: 3	
PARTICULARS BEI	LOW ARE TO BE	FURNISHED BY APPLICANT FO	OR RENEWAL CASES

B.K.I Examiner's Card No._____ Expiry Date : _____

Renewing for period from 1st January _____ to 31st December ____