



**NSW Karate Federation**

PO Box 300 Hoxton Park NSW 2171

A.B.N. 39 291 975 851

Tel: 0419 270 993

Web: [www.akf-nsw.com](http://www.akf-nsw.com)

Email: [admin@akf-nsw.com](mailto:admin@akf-nsw.com)

## NOMINATION FOR NEW MEMBERSHIP APPLICATION

State Branch: **NEW SOUTH WALES KARATE FEDERATION INC.**  
P.O. BOX 300 Hoxton Park NSW 2171

Full Name of Style

Name of NSW Head Instructor (relating to this application)

Grade: (attach all official certificates of grade)

Address

Home Phone:

Mobile Phone:

Work Phone:

Fax:

Email:

Name of Chief Instructor – Australia (if same, write “as above”)

Grade:

Address

Home Phone:

Mobile Phone:

Work Phone:

Fax:

Email:

International Affiliations recognised by the Federation  
(supply documented proof thereof)





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<b>Number of Dojos under your control:</b>		
<b>Estimated number of students under your control:</b>		
<b>Juniors:</b>		<b>Seniors:</b>
<b>Location</b>	<b>Training Times</b>	<b>Instructors in charge</b>

<b>When was your organisation formed/established in Australia?</b>
<b>By whom?</b>
<b>In what State?</b>

<b>Is your organisation incorporated?</b>		
<b>Does your organisation have a constitution? (If so, attach a copy)</b>		
<b>Does your organisation have an executive committee? (If so, list all officials and their position)</b>		
<b>Name</b>	<b>Position</b>	<b>Email</b>





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We the undersigned hereby acknowledge acceptance of the Conditions and Rules, which apply to New Membership application under the Association's Rules in Rule 7, Clauses 4a. and 4b. and will accept the decision of the state branch considering my application.

Date of Application: \_\_\_\_\_

Signature of Applicant(s):

Signed: \_\_\_\_\_

Signed: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Signed: \_\_\_\_\_

Signed: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

**Fee:**

Please enclose \$360 (Application Fee \$110 and NSWKF Annual Fee of \$250) together with this application. The Annual Fee of \$250 will be refunded if your application is unsuccessful. If the NSWKF Annual General Meeting accepts your membership application, you will be notified immediately.

**Distribution:**

Original Application: To New South Wales Karate Federation Inc.  
P.O Box 300, Hoxton Park NSW 2171

