

AIKIKAI FOUNDATION  
AIKIDO WORLD HEADQUARTERS

APPLICATION FOR INTERNATIONAL YUDANSHA CARD

Please print

Date .....

SURNAME..... FIRST NAMES.....  
 DATE OF BIRTH (day)..... (mth)..... (yr)..... SEX.....  
 OCCUPATION..... NATIONALITY.....  
 ADDRESS.....  
 .....  
 AIKIKAI MEMBERSHIP NO.....  
 NATIONAL ORGANIZATION.....  
 REPRESENTATIVE.....  
 DOJO.....  
 INSTRUCTOR.....

RECORD OF DAN GRADES

	DATE OF EXAM	EXAMINER	REGISTERED NUMBER	DATE OF REGISTRATION
SHODAN				
NIDAN				
SANDAN				
YODAN				
GODAN				
ROKUDAN				
SHICHIDAN				
HACHIDAN				