



GREATER NORTHEASTERN US KENDO FEDERATION

The regional federation

of

All United States Kendo Federation

KENDO EXAMINATION APPLICATION FORM

Exam Date _____/_____/_____

Examination Location _____

Requesting Rank _____ (Kyu / Dan)

Name _____

(Last)

(First)

(M.I)

Gender M or F (circle)

Address _____

(street)

(City)

(State)

(Zip code)

Phone _____ E-Mail address _____

Date of Birth _____/_____/_____ AUSKF ID # _____

Regional (Member) Kendo Federation _____

Club (Dojo) _____

Present Rank _____ (kyu/dan) **Date obtained** ____/____/_____

Location _____ **Federation** _____ **FIK member federation** _____

A copy of your current rank menjo: Please send it along with the exam application form.

List any handicaps, injuries etc _____

(Date)_____

(Signature of Applicant)

(Date)_____

(Instructor's Signature)

(Date)_____

(Signature of Regional President) ****required only for non-GNEUSKF member****

Please do NOT Staple these forms, please use clips, not staples.

MENJO APPLICATION

MENJO FEE CHART	
<i>English only</i>	
Kyu	
17yrs & Under	\$10
18yrs & Over	\$20
.....	
1 Dan	\$30
2 Dan	\$40
3 Dan	\$60
4 Dan	\$80

LAST _____ **FIRST** _____

DOJO SENSEI'S NAME _____

MAILING ADDRESS

(Street) (City) (State) (Zip)

**Please provide one address for each dojo since we will send all menjos together in one mailing. We prefer sensei's address.

1. Please pay exam & menjo fee **in advance**.
2. Please make **separate checks** for exam fee
3. Please make both exam & menjo checks payable to **GNEUSKF**.
4. Menjo check will be voided if the applicant do not pass the test.

Exam fee is \$25

Please send your essay with this application form.

Menjo **will not be requested** if menjo fee was not paid in advance.

Please send a copy of your current rank menjo.