

**BRUNEI DRAUSSALAM AIKIDO FEDERATION**  
**APPLICATION FOR KYU GRADING**

<b>To be filled by Applicant</b>		
<b>Membership</b>		
Membership Type: (Circle one) CHILDREN / ADULT	Rank Applied For  (Kyu)	Date of Registration (with BAF):  (day) (month) (year)
Name of Dojo		
<b>Present Rank</b>		
Present Rank:	Where (Dojo) Obtained:	
Date Rank Obtained  (day) (month) (year)	Date of Upcoming Examination  (day) (month) (year)	
<b>Applicant's Particulars</b>		
Full Name:	Gender: (Circle one) Male / Female	Date of birth:  (day) (month) (year)
Address:	Nationality:	
Tel No:	Occupation:	

<b>To be filled by Instructor</b>	
Remarks	Instructor's Signature
Examination Fee :	Applicant's Attendance After present Rank: (Circle one) Satisfactory / Unsatisfactory

I hereby make my application.

I hereby will not hold Brunei Darussalam Aikido Federation (BAF), its examiners, its instructors, assistants, partners and other organising bodies LIABLE for any bodily injuries and accidents occurs whist in taking part in examination or upgrading session in the art of Aikido whatsoever conducted at the above mentioned premises or at any other premises.

I shall indemnify Brunei Darussalam Aikido Federation (BAF), its examiners, instructors, assistants, partners and other organising bodies all proceedings and liabilities whatsoever which may taken or made against by reason of claim or action of whatsoever nature which may be brought by me or on my behalf in respect of the foregoing.

Date : \_\_\_\_\_ Applicant's Signature : \_\_\_\_\_