

GRADING APPLICATION FORM

Please ensure that this form is completed correctly and in BLOCK CAPITALS.

How you spell your name
is how your name will appear on your Grading Certificate.

Name:

Address:

.....

.....

Post Code:

Telephone Home:

Telephone Mobile:

Date of Birth (DD/MM/YYYY):

Club:

Present Grade:

Date of Last Grading (DD/MM/YYYY):

Club Instructor:

Club Instructors Signature:

Office Use Only:

Style (Karate / Kickboxing):

Grading From: Belt to: Belt

Start Grading: Complete Grading:

Name: Pass Mark: %

Price: £ Paid: (Cash Only) Date (DD/MM/YYYY):