



KARATE ASSOCIATION OF INDIA®

REGISTRATION **JUDGE | REFEREE SEMINAR FORM**

Sr. No.: _____

ID No.: _____/2022-23

PHOTO

Full Name : _____

Date of Birth : _____ Age : _____ Gender : _____

Address : _____

City : _____ Dist. : _____ State : _____

Tel.: _____ Cellular : _____

E-Mail ID.: _____ Website : _____

Dan : _____ Style : _____

Name of Association : _____

For Office Use Only	
Payment	
Seminar Fees :	
Tie :	
Badge :	
Passport :	
Total =	

Sign of Applicant

Sign of State In charge

Received By

Organised By : Sports Karate-Do Association Maharashtra

On : 4th December 2022 | At : Mumbai, Maharashtra.