

EIKOKU ROSHU KAI

Classical Japanese Swordsmanship of Muso Jikiden Eishin Ryu



MEMBERSHIP APPLICATION

Please Print C	<u>learly</u>		
Full Name			
Date of Birth			
Address			
Postcode			
Email Tel			
Eikoku Roshu I	Kai membership number	r (ren	ewals only)
Muso Jikiden E	ishin Ryu Iaido Grade		(if applicable)
Dojo Name and	Location		
All NEW mem	bership applications n	nust include a passpo	rt photograph for licence.
I accept to abid I am fully awar that cannot be f assume all such I understand the	fully eliminated. I recog orisks. at it is my responsibility	eapon based martial di nise the physical risks to inform my dojo lead	oku Roshu Kai. iscipline carries a certain inherent risk of injury associated with these activities and knowingly der and other relevant instructors of any health pation before engaging in any training session
Fee enclosed (c	ircle as applicable) Mer	mbership is valid until	to the 31 st December
Annual renewa	£30.00 due 1 st	January	
New Member	Full Year to December Half Year July to December Quarter Year October to December		£30.00 £15.00 £7.50
Cheques payable	le to 'Eikoku Roshu Kai	1'	
Signed		Date	
Return to Membership Secretary:		Colin Wood, 4 Parkways Grove, Oulton, Leeds LS26 8TP Tel, 0113 2825507 email colinp,wood@tiscali.co.uk	

^{*} Copies of these documents are available through your dojo leader