



# BLACK BELT DOJO

MRS Arcade, West Hill, Chungam, Kozhikode, Kerala - 673005

lackbeltdojo07@gmail.com

+91-9995969549, 9895067782

## MEMBERSHIP APPLICATION FORM

**Standard Membership Benefits**

**New Applicant**

**Renew Membership**

- Become eligible to be selected as a BBDMA Team member.
- Eligible to compete participate in State National, International events organized By BBDMA affiliated associations.
- Discount to BBDMA Tournament and Seminar
- Membership Card & Certificate
- Wushu KungFu news updates via E-mail & other sources.
- BBDMA patches

Name \_\_\_\_\_

Sex \_\_\_\_\_ Age \_\_\_\_\_ Date of Birth \_\_\_\_\_

Guardian's name (if under 18) \_\_\_\_\_

Relationship \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Country \_\_\_\_\_

Phone (o) \_\_\_\_\_ ® \_\_\_\_\_

(M) \_\_\_\_\_ E-mail \_\_\_\_\_

Current Style or Affiliation \_\_\_\_\_

Association Name \_\_\_\_\_

Govt. Regd. Trust number (if any) \_\_\_\_\_

Amount Enclosed \_\_\_\_\_

### Type of Membership

Lifetime Membership: Enjoy a lifetime of full benefits in whichever type of membership you choose. Current members will receive a discount equivalent to a one-year membership..

Student Membership : - 250/-

School Membership : - 1500/-

Corporate Membership : - 5000/-

I certify that I have voluntarily submitted this membership application to BBDMA and agree to abide by all laws, Codes of ethical conduct, rules and regulation. I further certify that all of the information I have provided is true and correct to the best of my knowledge and belief. I fully understand and agree that participating in BBDMA organized and/or sanctioned event and tournament carries the risk of accidental injury and hereby assume that risk. I release BBDMA its agents, officers, judges, referees, employees, volunteers, successors and assigns from any and all liability and affirmatively waive any and all claims that may accrue arising out of my participation in BBDMA organized and/or sanctioned event and tournaments, or as a result from the action of BBDMA or its officers, judges, referees, employees, volunteers, successors and assigns in the performance of their respective duties in connection with BBDMA events and tournaments.

### For Office Use only

Date \_\_\_\_\_ received by \_\_\_\_\_

Amount \_\_\_\_\_ check # \_\_\_\_\_

Applicant's Signature.

\_\_\_\_\_ DATE \_\_\_\_\_

Parent's or Guardian's signature if applicant is younger than 18

\_\_\_\_\_ DATE \_\_\_\_\_

Please make check or cash payable to Black belt Dojo and send with completed application form to Regd. Address

**JAREES PUTHIYAPURA (BBDMA Gen. Secretary)**

WKFI, ISKA, NAKKO

MRS Arcade, WEST HILL, CHUNGAM,

Kozhikode, Kerala - 673 005

Mo. +91-9995969549, 9895067782

E-Mail: *lackbeltdojo07@gmail.com*

Photograph  
Attested by  
Endorsee