



British Aikido Federation

Application for Ikkyu/Yudansha Examination

Form 1A - To Be Completed by The Candidate

PLEASE WRITE CLEARLY IN BLOCK CAPITALS

Surname				Attach Photograph Here
First Name(s)				
Address				
Post Code		Tel. No		
Email				
Date of Birth (DD/MM/YY)		Age		
Place of Birth		Nationality		
Occupation				
Current Dojo		Instructor		
Current Grade				
Date Awarded		Place Awarded		
Examiner				
IAF Number				
Hombu Registration Number				
Date of Hombu Registration				

DATA PROTECTION

It is a requirement that persons give their written authorisation to have personal details recorded and kept. By adding your signature below, you are allowing your personal details to be kept on file by the *British Aikido Federation*. Your personal details will not be disclosed to any third party nor will they be processed for any non-Aikido related purposes.

Candidate's Signature

Date