

KYU EXAM FORM

NAME: _____

DATE OF BIRTH: _____

DOJO LOCATION: _____

EXAM DATE: _____

CURRENT RANK: _____

ISKF MEMBERSHIP EXPIRATION DATE: _____

SIGNATURE: _____ *DATE:* _____

PARENT'S SIGNATURE (UNDER 18): _____

TYSON'S CORNER
SPORT & HEALTH CLUB
8250 GREENSBORO DR
MCLEAN, VA 22102
703.442.9150

FSKC
Chief Instructor: Mohammad Gharavi
Members of
International Shotokan Karate Federation
(ISKF)

GOVERNMENT CENTER - MAIN
12000 GOVERNMENT CENTER
PARKWAY, SUITE 114
FAIRFAX, VA 22035
703.324.5590