# United States Karate Alliance, Inc.

P.O. Box 20609 Albuquerque, NM 87154
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**KYU RANK MEMBERSHIP APPLICATION**

| ***New Memberships:*** | ***Renewals:*** |
|---|---|
| ☐ **New 1 year Membership - $30** [Price Until 9/8/2020]<br>Includes a USKA patch and membership card | ☐ **Individual 1 year Membership Renewal -$20** [Price Until 9/8/2020]<br>Includes a USKA patch and membership card |
| ☐ **New 2 year Membership - $60** [Price Until 9/8/2020]<br>Includes a USKA patch and membership card | ☐ **Family 1 year Membership Renewal - $75** [Price Until 9/8/2020]<br>Includes a patch and membership card |
| ☐ **New 1 year Family Membership - $90** [Price Until 9/8/2020]<br>Includes USKA patches and membership cards for each | |
| ☐ **New 1 year School Membership - $60** [Price Until 9/8/2020]<br>Includes membership for Head Instructor, USKA patches, membership card | |
| ***Lifetime:*** | ***Promotions:*** |
| ☐ **Individual Lifetime Membership (white – brown) $350**<br>Includes USKA patches, membership card and certificate<br>☐ **Family Lifetime Membership (white – brown) $700**<br>Includes USKA patches, membership cards and certificates for each | ☐ **Promotion Certificate (white – brown) $20**<br>**please provide documentation to** uskaratealliance@gmail.com<br>☐ **Promotion Certificate (black belt) $TBD**<br>**please provide documentation and contact** uskaratealliance@gmail.com |

First Name: |___|___|___|___|___|___|___|___|___|___|___|___| Last Name: |___|___|___|___|___|___|___|___|___|___|___|___|

Date of Birth: |___|___/___|___/___|___| Age: |___|___| Sex: M / F Phone: |___|___|___-___|___|___-___|___|___|___|

Email: |___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|

Dojo Email: |___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|

Address: |___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___| City: |___|___|___|___|___|___|___|___|___|___|___|___|

State: |___|___| Zip: |___|___|___|___|___| Instructor: |___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|

School: |___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___ Style: |___|___|___|___|___|___|___|___|___|___|___|___|

Rank:|___|___|___|___|___|___|___|___|___|___| Date rank acquired: |___|___/___|___/___|___| Month/Year Started:|___|___/___|___|

**IF RENEWING:** USKA Member Number: |___|___|___|___|___|___|___|

Present Expiration Date: |___|___/___|___/___|___| Date of last Rank Promotion: |___|___/___|___/___|___|

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If applying for a Family Membership, please list additional family members and their information below.

First Name: |___|___|___|___|___|___|___|___|___|___|___|___|___|___| Last Name: |___|___|___|___|___|___|___|___|___|___|___|___|___|___|

Date of Birth: |___|___|___|___|___|___| Age: |___|___| Sex: M / F
Rank: |___|___|___|___|___|___|___|___|___|___|___ Date rank acquired:|___|___/___|___/___|___| Month/Year Started: |___|___/___|___

First Name: |___|___|___|___|___|___|___|___|___|___|___|___|___|___| Last Name: |___|___|___|___|___|___|___|___|___|___|___|___|___|___|

Date of Birth: |___|___|___|___|___|___| Age: |___|___| Sex: M / F
Rank: |___|___|___|___|___|___|___|___|___|___|___ Date rank acquired:|___|___/___|___/___|___| Month/Year Started: |___|___/___|___

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- Any applicant under 18 must attach a copy of his / her birth certificate or email it prior.

Applicant's Signature: _____ Date: |___|___/___|___/___|___|

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☐ ***Check payable to:*** **United States Karate Alliance, Inc.** ☐ *Credit Card:* Visa MasterCard Discover

**CC#** |___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___| *(Amex is not accepted at this time)*

**Expiration Date:** |___|___|___|___| **CVV:** |___|___|___|

**Cardholder's Signature:** _____ Date:|___|___/___|___/___|___|

**Phone:** |___|___|___-___|___|___-___|___|___|___|

**Exhibit 5**