

RENEWAL YEAR 2024
I.S.K.F. INSTRUCTOR TRAINEE INSTITUTE

TO: I.S.K.F. Instructor Trainee Institute

I wish to renew as a part-time trainee.

Name _____
last first middle

Address _____
number/p.o. box street city

_____ Manitoba _____ Canada _____
province country postal code

Trainee Number _____

Initiation Year _____

Chief Instructor _____ Hiroyoshi Okazaki Sensei _____

Technical Chairman _____ Larry Loreth Sensei _____

Instructor _____

Technical Vice-Chairman _____

Please find enclosed a Money Order for the amount of **\$ 80.00 US**

Currency, payable to: ISKF

Dated: _____ signed: _____