



WORLD COUNCIL OF JU-JITSU ORGANIZATIONS
“Founded to guide and assist the growth of Ju-Jitsu internationally”

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APPLICATION FOR MEMBERSHIP

PLEASE NOTE: ALL QUESTIONS MUST BE ANSWERED

NAME OF APPLICANT: _____ DATE OF BIRTH _____

ADDRESS _____

HOME TELEPHONE _____ FAX _____ MOBILE _____

E-MAIL ADDRESS _____ OCCUPATION _____

NAME OF JIU-JITSU ORGANIZATION _____

CERTIFIED RANK _____ DATE RECEIVED _____

NAMES OF OTHER ORGANIZATIONS YOU BELONG TO _____

OTHER CERTIFIED MARTIAL ARTS RANK _____

HOW MANY CLUBS IN YOUR ORGANIZATION (APPROX) _____

HOW MANY CERTIFIED BLACK BELTS IN YOUR ORGANIZATION (APPROX) _____

WILL YOU BE ENTERING A JIU-JITSU TEAM IN FUTURE WORLD CHAMPIONSHIPS _____

DO YOU JUST REQUIRE (NON COMPETITIVE) ASSOCIATE MEMBERSHIP _____

INFORMATION CERTIFIED BY _____ DATE _____

PLEASE RETURN TO: TERRY YANKE
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