



Black-belts to be registered within the International Wado Federation

Name of Applying Association _____ Date _____

Correspondence Name _____ Position _____

Address _____

Post/Zip Code _____ Email (please print) _____

Name Surname; Forename then Family Name PLEASE PRINT CLEARLY (as pattern shown)	Wado Dan	Date of Birth Day/Month/Year	Wado Examiner/Assessor	Grade Date
<i>Smith; John Smith</i>	<i>2</i>	<i>06/04/56</i>	<i>F. Arakawa</i>	<i>11/09/17</i>

All Black-belts will be registered within the **International Wado Federation**. All IWF Yūdansha Certificates can be downloaded from the IWF Website. Please locate your ‘personalised’ certificate, using your Affiliation Registration Number as reference. More members can be added using additional Registration Forms, if required.

After completion, please send electronically by email: iwfllicences@gmail.co.uk or by post to the; IWF Registrations Officer. 57 South Hill, Hooe, Devon. GB. PL9 9PT.

ALL FORMS MUST BE RETURNED IN WORD.DOC FORMAT FOR ADMINISTRATION ACCESSIBILITY PURPOSES