



# All United States Kendo Federation

## SHOGO

### KENDO / IAIDO (Circle one) EXAMINATION APPLICATION FORM

Requesting Shogo: \_\_\_\_\_ Exam. Date: \_\_\_\_\_ Date: \_\_\_\_\_

AUSKF ID No.: \_\_\_\_\_ Regional Kendo Federation: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
(Street)

\_\_\_\_\_ (City) (State) (Zip)

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ FAX: \_\_\_\_\_

Present Rank: \_\_\_\_\_ Date Received: \_\_\_\_\_

Place of Practice: \_\_\_\_\_ How many times a week: \_\_\_\_\_

If requesting Shogo fill in I,II and III:

	I Attend National Camp/Seminar	II Attend Regional Camp/Seminar	III Shinpan Experience at Taikai
1.	_____ (Title) (Year)	_____ (Title) (Year)	_____ (Title) (Year)
2.	_____	_____	_____
3.	_____	_____	_____

List any handicaps, injuries etc.: \_\_\_\_\_

\_\_\_\_\_  
(Signature of Applicant) (Date)

\_\_\_\_\_  
(Signature of Regional Federation President) (Date)

- \* For fewer mistakes, please print clearly.
- \* A Copy of your Menjo (Promotion Certificate) and \$50 Fee Payable to All United States Kendo Federation must accompany this form.
- \* We cannot process without your AUSKF ID Number.