



DAN TEST APPLICATION FORM

NAME: _____ DATE OF BIRTH: _____

ADDRESS: _____

POSTAL CODE: _____

Preferred Contact number(s)

(Residence) _____ (Business) _____

(Cell) _____

Email: _____

PROVINCIAL ASSOCIATION: _____ DATE JOINED Karate Canada: _____

STYLE ASSOCIATION OR CLUB: _____

CLUB: _____

PRESENT style association DAN RANK (attached photocopy of certificate): _____

PRESENT Karate Canada DAN RANK if held (attached photocopy of certificate): _____

DAN Level Sought: _____

For Technical Committee use only

Approved: _____ Date: _____

Karate Canada Dan Recognized: _____ Karate Canada ID No. _____ / _____ / _____

**PLEASE SEND YOUR APPLICATION TO THE DAN
PROGRAM COORDINATOR.
PLEASE INCLUDE THE FOLLOWING:**

1. Application form
2. A photocopy of your current Dan certificate(s)
3. A recent passport-style photo
4. A brief biography / summary of your karate history
5. Cheque payable to "Karate Canada" in the amount of:

- 1st dan \$ 75.00
- 2nd dan \$ 100.00
- 3rd dan \$ 150.00
- 4th dan \$ 200.00
- 5th dan \$ 250.00
- 6th dan \$ 300.00
- 7th dan \$ 350.00
- 8th dan \$ 400.00

Please note that fees are non-refundable, regardless of result.

Karate Canada Dan Coordinator

4545 Pierre de Coubertin
P.O. Box 1000 - Station M
Montreal, Quebec, Canada
H1V 3R2

EMAIL ADDRESS :

craig@karatecanada.org

cc: olivier@karatecanada.org