



DAN TEST APPLICATION FORM

Date: _____

NAME: _____ DATE OF BIRTH: _____

ADDRESS: _____

_____ POSTAL CODE: _____

TELEPHONE: (Res.) _____ (Bus./Cell) _____

Email: _____

PROVINCIAL ASSOCIATION: _____ DATE JOINED KARATE CANADA: _____

KARATE ASSOCIATION: _____

CLUB: _____

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

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

DAN Level Sought: _____

DOCUMENTATION REQUIRED: (a) photocopy(s) of your current Dan certificate(s);
(b) A recent passport-size photo; (c) A brief biography / summary of your karate history

FEES: 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.

Please make your cheque payable to Karate Canada and forward with your application to:

Karate Canada Program Manager
4545 Pierre de Coubertin
Montreal, QC
H1V 0B2

eMail: alexandra.roy@karatecanada.org

Approved: _____

Date: _____

I.D.: _____ - _____ - _____