



A i k i B u d o S H I S E I K A N  
Application for admission

合気武道  
至誠館

First Name/Last Name			
Date of birth (Age)	(yyyy/mm/dd)	( )	Sex: Male Female
Nationality / State	/		
Address & Phone			
Educational background		Occupation	
Other martial arts	1.	2.	
Introduced by whom	(Member No: )		
Address of Introducer			
Emergency Contact Phone Number	1	Name	
	2	relation	
<p>I would like to ask permission of enrollment from your Association( Aiki budo SHISEIKAN) for getting instruction of Daitou-ryu-Aiki Budo.</p> <p>When I get approval of admission,I swear to obey the Admission vow as follows</p> <p>Year            month            day</p> <p>To</p> <p><b>Aiki budo SHISEIKAN headquarter</b></p> <p>Name _____</p> <p>Signature_____</p> <p>Year            month            day            Permission Number_____</p>			

\*\*\*\*\*Admission vow\*\*\*\*\*

1. When I get approval to enroll a person as a member , I should not lightly use Daitou-ryu-Aiki techniques that I was learned here.
2. I never do an act as disgrace the Aiki budo SHISEIKAN.
3. I should observe the rules while I receive and lead practices the Daitou-ryu-Aiki Budo.
4. I never practice and study of techniques with person who not member of Aiki budo SHISEIKAN at the inside and outside of school.
5. When I do an act as break these above clauses , I will receive any punish include expulsion without objection.