

Aikido Association of America/ International Kyu Test Application

Please Print Clearly and Complete the Entire Form

I hereby apply to take the promotion test for the rank of _____ Kyu

Check one: Adult Teen/Child Test Date: _____
(D/M/YYYY)

Name: _____

Street Address: _____

City/State/Province: _____ Zip: _____

Phone Number: _____ Email: _____

Date of Birth: _____
(D/M/YYYY)

Name of Dojo you belong to: _____

Membership Number: _____

Present Rank: _____ Kyu Dojo Rank was Received at: _____

Date of Test: _____ Belt Size: _____
(D/M/YYYY)

Applicant Signature: _____ Date: _____
(D/M/YYYY)

Please provide us with the date(s) of AAA/AAI seminar, summer camp, or instructor's seminar
you have attended if it is part of your test requirements.

AAA/AAI Seminar: _____ AAA/AAI Camp: _____

AAA/AAI Instructor's Seminar: _____

Test Result: Pass Fail

Documents Needed: Kyu Book Certificate

Examiner's Signature: _____

Dojo-Cho's/Instructor's Signature: _____

	Amount	Date
Dojo Fee	\$	
AAA Dues	\$	
Test Fee	\$	
Total	\$	

For Office Use Only

Invoice Number: _____

Recorded By: _____