



# **WORLD KUNG FU TOA**

## **• F E D E R A T I O N •**

**OFFICE OF THE FEDERATION**  
Banegaardsgade 36 A kld., 8000 Aarhus C, Denmark  
Phone: (0045) 86 12 14 15, Mobile: (0045) 40 52 39 00,  
[www.wkfff.com](http://www.wkfff.com)

### WKFTF APPLICATION

1. Name: \_\_\_\_\_
2. Address: \_\_\_\_\_  
\_\_\_\_\_
3. Telephone number: \_\_\_\_\_
4. Email address: \_\_\_\_\_
5. Place of birth: \_\_\_\_\_
6. Martial arts style: \_\_\_\_\_
7. Which organization or club are you an active  
member of?: \_\_\_\_\_
8. Name and address of the club that you are currently  
attending: \_\_\_\_\_  
\_\_\_\_\_
9. Level in your martial art: \_\_\_\_\_
10. If you are a master or instructor, what are the number of students in your club?:  
\_\_\_\_\_



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11. Further comments:

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All information in this application shall be held in confidence

The signature below indicates that the information given in this application is true. I agree to accept any decision that the committee may make with the understanding that the decision is final and cannot be contested.

I hereby acknowledge that I am aware of the requirements for membership and state that I'm eligible for consideration of a membership in World Kung Fu Toa Federation.

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Signature of applicant

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Date