



INTERNATIONALER SHINSON HAPKIDO COURSE

Registration

Send this registration form to: licence@shinsonhapkido.org

Only complete registrations can be considered. (Please do NOT send an email to the ISHA administration email address).

I hereby register for the _____ International Kyosanim Course in _____ .
Cost _____ € (to be paid on the day of arrival)

1) Your data:

Name _____ First name _____
E-Mail _____ Age _____
Ki _____ Dan Grade _____
Dojang _____

2) Documents & Questions:

I already have a Kyosanim program no yes
I already have a first aid booklet no yes
Vegetarian no yes
I am a leader a dojang no yes Dojang _____
I am a leader a section no yes Section _____
Other

3) Binding registration

I acknowledge that in case of cancellation 7 days or less before the beginning of the event, I will have to pay the full amount.

Place, date

Signature