



USA KARATE OFFICIALS

REFEREE COURSE ENTRY FORM

Date of Course _____ **Location** _____ **Instructor** _____

USA KARATE Membership # _____ Course Fee \$ _____ Paid _____

Name _____ Birthday _____ Gender _____ Age _____

Karate Rank _____ Style _____ Dojo _____

Address _____ City _____

State _____ Zip _____ Email _____

Cell Phone Number (____) _____ - _____ Alternate Phone Number (____) _____ - _____

USA Karate Kata Qualification

Last Promotion Date _____ Location _____ Promoted by _____

Tournament attendance since last qualification _____

USA Karate Kumite Qualification

Last Promotion Date _____ Location _____ Promoted by _____

Tournament attendance since last qualification _____

Print Name _____ Signature _____ Date _____

FOR OFFICE USE ONLY

Kata Written Score _____ Prior Kata License _____ Promoted to _____

Kumite Written Score _____ Prior Kumite License _____ Promoted to _____

Need Passport Yes No Need Badge Yes No Code of Conduct Yes No

Completed Safe Sport Yes No Completed Background Check Yes No

Date _____

Date _____