



# European Shito Ryu Karate Federation

## APPLICATION TO REFEREE COURSE

First name: \_\_\_\_\_

Family name: \_\_\_\_\_

Dan: \_\_\_\_\_

Country: \_\_\_\_\_

Age: \_\_\_\_\_

Name of Federation/ Group: \_\_\_\_\_

\_\_\_\_\_ Date

\_\_\_\_\_ Name of President of Federation/ Group

\_\_\_\_\_ Signature of President of Federation/Group

The above Candidate has the following licence(s): (Please put an X in the appropriate box)

I have National licence	<input type="checkbox"/>	I have International licence	<input type="checkbox"/>
I have Kata	Judge B <input type="checkbox"/>	Judge A <input type="checkbox"/>	
I have Kumite	Judge B <input type="checkbox"/>	Judge A <input type="checkbox"/>	Referee B <input type="checkbox"/> Referee A <input type="checkbox"/>

National & International licence organization write the name:.....

.....

Will participate in Kata Course <input type="checkbox"/>	Will participate in Kumite Course <input type="checkbox"/>
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Bring this application in **original to the Registration** and send a copy at the latest **one month** before the 1<sup>st</sup> day of the Championships to:

**ESHRKF Office**  
Mr. Peter Bad'ura  
M.R.Štefánika 47  
Nové Zámky, SLOVAKIA

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