



התאחדות הקראטה בישראל
Israel Karate Federation

www.israelkaratefederation.com



ת מ ר ג ה

APPLICATION TO REFEREE

First name: _____ **Kyu :** _____
Family name: _____ **Dan :** _____
Country: _____ **Age:** _____ **Name of Nat.** _____
Federation: ISRAEL KARATE FEDERATION
Date : _____ **Name of head coach/club :** _____
Signature of the head coach/club: _____

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

<input type="checkbox"/> I don't have IKF kata licence	<input type="checkbox"/> I don't have IKF kumite licence
<input type="checkbox"/> (keeping rank) Refresh	<input type="checkbox"/> coach
I have Kata license Judge-A <input type="checkbox"/> Judge-B <input type="checkbox"/>	
I have Kumite license <input type="checkbox"/> Referee-A <input type="checkbox"/> Referee-B <input type="checkbox"/> Judge-A <input type="checkbox"/> Judge-B	

Will participate in Kata Course	Will participate in Kumite Course
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ing this application in original to the Registration and send a copy at the latest one month before the 1st day of the Referee Course to the IKF-RC Secretary or to the IKF Secretariat Office.

Mr: Avi meshli
 IKF-RC Secretary