

Name of National Sports Association:

.....

Registration No:

Country of Incorporation:

Street Address:

.....

City and Zip/Postal Code:

Country:

Telephone:

Fax:

Website Address:

Email Address:

Authorized Person:

Address Headquarters

(if different from above):

City and Zip/Postal Code:

Country:

Telephone:

Fax:

Website Address:

Email Address:

Has the National Sports Association been refused entry to any international sports association or has its membership or registration with such association terminated or been suspended? Yes No

Has the National Sports Association been a member of World Fudokan Federation (the "WFF") previously? Yes No

I declare that the information provided in this application is true and to the best of my knowledge and belief. I understand that any false or misleading statement in this form could lead to disciplinary action being taken against me and/or may invalidate any decision reached on this application. We shall observe and abide by the Rules and Regulations of the WFF if We are admitted as a member of WFF.

Secretary/
President: _____
Please Print

Signature: _____

Date: _____
(dd/mm/yy)

Authorized Person

The following persons are hereby authorized to execute any instructions in connection with the membership pursuant to the *WFF* Mandate executed by the National Sports Association with the *WFF*.

The signatures adjacent to each of the names are the genuine signatures of such persons and shall operate as specimen signatures of such persons.

Name (BLOC CAPITALS)	Signature	Title (e.g. Director)
1.		
2.		
3.		

- Title (Mr, Mrs), First Name, Last Name:

Street Address:

City, Zip/Postal Code:

Nationality:

Passport No, Country of Issue:

(Attached certified copy of Passport)

Title (e.g. Director):

Date of Birth (mm/dd/yy):

Telephone (Home No):

Telephone (Mobile No):

Telephone (Work No):

Telephone (Fax No):

Email Address:

Has the authorized person ever been convicted of any criminal offence? Yes No

Has the authorized person ever been adjudged a bankrupt or made an assignment for the benefit of his creditors? Yes No

Has the authorized person ever been adjudged a subject of any investigation by governmental, statutory or professional in respect of any offence involving dishonesty or any complaint for professional misconduct? Yes No

WFF Privacy and Data Protection Policy

The *WFF* seeks to collect and may use and/or disclose personal data of authorized persons for matters relating to National Sports Association membership and/or the conduct of the *WFF* business in accordance with the Personal Data Protection Act. The *WFF* may from time to time use personal data of authorized persons to inform them of related news, *WFF* activities, members' benefits, goods, services, facilities and events. The *WFF* may also use personal data of authorized persons for the conduct of statistical research and studies, and analyse the data collected to administer, develop and improve its services.

By accepting membership with the *WFF* and/or participating in any events or activities organized by the *WFF* (including any purchases of goods and services from the *WFF*), authorized persons consent to the collection and use of their personal data in accordance with the *WFF* Privacy and Data Protection Policy. Authorized persons can withdraw their consent for certain future actions at any time.

I declare that the information provided in this application is true and to the best of my knowledge and belief. I understand that any false or misleading statement in this form could lead to disciplinary action being taken against me and/or may invalidate any decision reached on this application. We shall observe and abide by the Rules and Regulations of the *WFF* if We are admitted as a member of *WFF*.

Secretary/
President:

Please Print

Signature: _____

Date: _____
(dd/mm/yy)