IKF EVENT OFFICIAL

LICENSE - REGISTRATION APPLICATION

Print out This form & **MAIL** to the **IKF** With Your Application Fee As Stated Below.

- - "PLEASE PRINT NEATLY" - -

If we cannot read your printing, YOUR APPLICATION WILL NOT BE ACCEPTED!
Application Forms WITHOUT FEES will be Disposed of

1. **FIRST NAME** ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐
2. **LAST NAME** ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐
3. **AGE** ☐☐ **Birthday (Mo, Day & Year):** ☐☐ / ☐☐ / ☐☐ **M** ☐ **F** ☐
4. **CITY:** _____ **STATE:** _____ **ZIP:** _____ **COUNTRY:** _____
5. **E-MAIL ADDRESS** _____
6. **CONTACT NUMBER FOR OFFICIALS PAGE** (☐☐☐) ☐☐☐ ☐☐☐☐
7. **BELOW FEES ARE PER YEAR. You are applying to be an Official IKF:**

LICENSE FEE IS EQUAL TO 1 DAY WORK FEE.

o ____ **JUDGE: $100 / ____ RENEW: $100** o _____ **TIMEKEEPER: $100 / ____RENEW: $100**

o ____ **REFEREE: $200 / ____ RENEW: $100** o _____ **REPRESENTATIVE: $250 / ____RENEW: $100**

o ____ **INSPECTOR: $100 / ____ RENEW: $100** o _____ **DOCTOR: $250 / ____RENEW: $100**

8. **NEW IKF OFFICIALS - EXPERIENCE - QUALIFICATION**
   o _____ I have attached a letter explaining my qualifications to be an IKF Event Official.
   o _____ I took an IKF Certification Course - **COURSE MUST SAY "IKF CERTIFICATION COURSE"**
   - WHEN: _____
   - WHERE: _____
   - **IKF** INSTRUCTOR:_____

   o _____ Due to My Experience I Was Approved without an IKF Certification Course.
   - Who was the IKF Official that Approved You: _____
   - WHEN & WHERE: _____
9. **MANDATORY:** E-mail us your headshot photo in a jpg format to **main@ikfkickboxing.com**
10. I certify the above Is true and I confirm so by my signature:_____ Date: ___/___/___

Please send this Form and Fees to: IKF Attn: IKF OFFICIALS LICENSE - REGISTRATION
P.O. Box 1205, 9250 Cypress Street, Newcastle, CA, 95658, USA

PERSONAL CHECK OR CASHIERS CHECKS ONLY
MADE OUT TO "IKF"

Registration Forms WITHOUT FEES will be Disposed of.

www.IKFKickboxing.com - www.IKFMuayThai.com