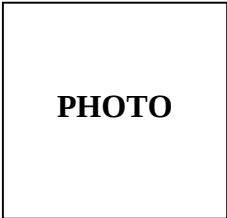




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Black Belt Individual Form

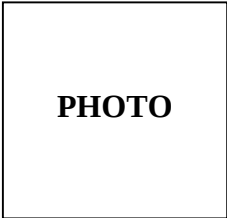


Family Name			First name		
Passport No.			Date of Birth	Year	Month Day
			/ /		
Address				Zip:	
Country					
Tel			E-mail:		
Weight (Kg)					
Certificate No.		Current Degree		Status Card	
Gender	Male..... Female.....	Age Division			
Division	Pattern.....Sparring.....Power Tech.....Special.....Team.....				



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