



JUJITSU AMERICA SCHOOL'S MEMBERSHIP FORM

Registration Information Form (use another sheet if necessary)

PLEASE WRITE ALL INFO CLEARLY AND NEATLY OR PROCESSING COULD BE DELAYED

MEMBER FEE: \$20

DOJO FEES: \$50

DOJO W/LIFE MEMBERSHIP FEE: \$30

DOJO NAME: _____

#	Name	Rank	Email (Please write clearly)	Amount
1				
2				
3				
4				
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23				
24				
25				

Dojo Head Signature: _____ Date: _____

MAIL FORM WITH PAYMENT:

Jujitsu America
c/o Joe Souza
1755 E. Tuolumne Road
Turlock, CA 95382

Total Enclosed: \$ _____

Approved by: _____ Date: _____

(For Jujitsu America Board of Directors Use Only)

(Acceptance Date)