



MALAYSIA KARATE FEDERATION

Photo

APPLICATION TO REFEREE COURSE

Full Name : _____

IC No : _____

Address : _____

Sex : _____

Dan : _____

Contact No : _____

Age : _____

Name Of Association : _____

Date

Name of President of Association

Signature of President

Date

Signature of Chairman – Zone Referee Commission

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

I don't have kata or kumite MAKAF licence

I have Kata Judge-B Judge-A

I have Kumite Judge-B Judge-A Referee-B Referee-A

Notice: Bring this application in **original to the Registration** and send a copy by **23rd March 2007** to the MAKAF-RC Secretary.

MAKAF – RC Secretary
Mr.Lim Chee Jinn

Mobile
Fax
Email

012-4860889
limcjin@hotmail.com