## school MEMBERSHIP APPLICATION



WMAA
Phone:
716-771-1291
Mailing Address:
PO Box 5
West Seneca, NY 14224
Website:
WWW.WMARNIS.COM

admin@wmarnis.com

| School Information Name of School Owner   |             |      |           |   |           | Name of School      |    |         |        |                         |           |                |             |  |
|---|-------------|------|-----------|---|-----------|---------------------|----|---------|--------|-------------------------|-----------|----------------|-------------|--|
| Address City  |             |      |           |   |           | State               | Z  | ip      |        | Countr                  | Country   |                |             |  |
| Contact Phone   |             |      |           |   | Fax       | Fax                 |    |         |        | Year School Established |           |                |             |  |
| ( ) ( ( What styles(s)/system(s) are currently being taug   |             |      |           |   |           | )<br>nt Web Address |    |         |        |                         |           | E-mail Address |             |  |
|   |             |      |           |   |           |                     |    |         |        |                         |           |                |             |  |
| Instructor Information Head Instructor  |             |      |           |   | Rank      |                     |    | Style   |        |                         |           | Date of Birth  |             |  |
| Modern Arnis Ranking History  |             |      |           |   |           |                     |    |         |        |                         |           |                |             |  |
| Line (1): Please fill out the date for all degrees of Black Belt you have certifiably earned. Line (2): Please fill out name of the Head Instructor/Rank who tested you for that rank.  |             |      |           |   |           |                     |    |         |        |                         |           |                |             |  |
| 1st Black   | 2nd B       | lack | 3rd Black | ( | 4th Black | 5th Black           | 6t | h Black | 7th Bl | ack                     | 8th Black | 9th Black      | 10th Black  |  |
|   |             |      |           |   |           |                     |    |         |        |                         |           |                |             |  |
| Other or Past Martial Arts Training   |             |      |           |   |           |                     |    |         |        |                         |           |                |             |  |
| Styles / Sys  |             |      |           |   |           |                     |    |         |        |                         |           |                |             |  |
| Last Rank Earned  |             |      |           |   |           |                     |    |         |        |                         |           |                |             |  |
| Head Instructor   |             |      |           |   |           |                     |    |         |        |                         |           |                |             |  |
| WMAA Fees<br>School Membership: \$299 Lifetime  |             |      |           |   |           |                     |    |         |        |                         |           |                |             |  |
| Payment Options  Check  Money Order  Credit Card  |             |      |           |   |           |                     |    |         |        |                         |           |                |             |  |
| Credit Card: Uisa Mastercard Mex Discover Card# Exp/  |             |      |           |   |           |                     |    |         |        |                         |           |                |             |  |
| Name as shown on credit card  |             |      |           |   |           |                     |    |         |        |                         |           |                |             |  |
| I certify that the above statements made herewith are true and that I understand that falsification of any item or failure to comply with said requirements, rules and regulations will result in immediate termination in the World Modern Arnis Alliance. |             |      |           |   |           |                     |    |         |        |                         |           |                |             |  |
| XApplicant's Signature  |             |      |           |   |           | <del></del>         |    |         |        |                         | Date      |                |             |  |
|   | SMA 4-26-08 |      |           |   |           |                     |    |         |        |                         |           |                | SMA 4-26-08 |  |