

Club Membership Application Form

Club Name: _____

Mailing Address: _____

Postal Code: _____ Phone: () _____ Fax: () _____

Email Address: _____

Website Address: _____

Instructor Name: _____ Belt Rank: _____

To assist your applications for membership please attach photocopies of any diplomas, membership cards or other relevant material.

Number of Black Belts: _____ Number of Active Students: _____

Non Profit Incorporation #: _____ For Profit Business #: _____

Non Profit Application Fees: \$250 For Profit Application Fees: \$350

Other Information: _____

If my application is accepted I agree to abide by the rules, regulations and as determined by The Saskatchewan Brazilian Federation Inc. Once the club or member is provisionally accepted, one-year probation before final acceptance is required.

I hereby declare that to the best of my knowledge the foregoing statements are true.

Applicant Signature

Date

Please complete and mail to:
The Saskatchewan Brazilian Jiu Jitsu Federation Inc.
2124 Broad St,
Regina, Sk
S4P 1Y5

FOR OFFICE USE ONLY
Date Received: _____