Dantai Membership Application

Organization	Contact
Name	Name
Address	Address
City State Zip	City State Zip
Phone	Phone

Organizational Information

Type

Sole Proprietorship ❑ Partnership ❑ Corporation ❑

Not-for-Profit Corporation ❑ Unincorporated Not-For-Profit Corporation ❑

*If Incorporation, what state are you incorporated in?*_____

Arts or Styles Serviced

Single Style or Art ❑ Any or All ❑ Specific Only ❑

Please List Art(s) and/or Style(s):

Organizational Membership Data

President or Other Chief Officer:_____

List all other officers and titles.

Name/Title	Name/Title
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Total Number of Black Belts: # _____

Total Number of Other Martial Artists: # _____

Total Number of Non-Martial Arts members: # _____

Total Number of Members *(Total of the above)*: # _____

I hereby make application for the above organization as an Dantai membership in the US Martial Arts Federation. I affirm that I am the official representative of the above organization and that the above organization recognizes without qualification that the US Martial Arts Federation is the Official Confederation of USA National Federations.

President or Chief Officer	Secretary
_____	_____

Date:_____

NOTE: Organizational Information must be attached.