



## European Chinese Kuoshu Federation

### Membership Application

Please complete this form in **black** ink and BLOCK capitals or typed script and include two recent colour passport size photographs or a JPEG image of the Organisation's Leader

<b>1. Organisation Details</b>	
Name	
Date Established	
Government Registration	
ECKF No.	Renewal Only
<b>2. Organisation Leader</b> (eg President, Chairperson, CEO or Director)	
Title	
First Name	
Surname	
Position	
Date of Birth	
Gender	
Education (eg PhD)	
<b>3. Organisation Address</b>	
Building, No. and Road	
Area/Town	
City/County	
Country	
Post Code	

<b>4. Organisation Contact</b>			
Telephone			
Facsimile			
E-mail			
Website			
<b>5. Organisation Executive Staff</b> (Title, First Name and Surname)			
Vice President			
Secretary General			
Treasurer			
Chief Referee			
Chief Coach			
<b>6. Organisation Personnel</b>			
Number of Instructors			
Number of Officials			
Number of Students			
Number of Referees			
<b>7. Organisation Structure</b> (Please Tick)			
Style	Profit <input type="checkbox"/>	Non Profit <input type="checkbox"/>	Academic <input type="checkbox"/>
Venue	Permanent <input type="checkbox"/>	Public Hire <input type="checkbox"/>	Private Hire <input type="checkbox"/>
Audience Seating	None <input type="checkbox"/>	Up to 200 <input type="checkbox"/>	Over 200 <input type="checkbox"/>

On behalf of my organisation and its members, I subscribe to the aims and objectives of the European Chinese Kuoshu Federation (ECKF) and agree to abide by its constitution, rules, regulations and governance upon becoming a member.

\_\_\_\_\_  
Signature of Organisation's Leader

\_\_\_\_\_  
Date

<b>For Office Use Only</b>	Probation Approved <input type="checkbox"/>	Ordinary Member <input type="checkbox"/>
Fee Paid <input type="checkbox"/>	Membership Approved <input type="checkbox"/>	Associate Member <input type="checkbox"/>