



iARNIS MEMBERSHIP APPLICATION FORM

2x2 PHOTO

					D/	ATE OF APPLICATION _			_	APPLICANT'S	SIGNATURE ABOVE	
Mark with a check (√	') to which a	applies				TYPE OF APP	PLICATI	ON				
				REFEREE/JUDGE				MEMBER SINCE (YYYY)				
APPLICANT INFORMATION												
Name:												
LAST NAME						GIVEN NAME				MIDDLE NAME		
									Phone:			
								Mobil				
Civil Status: Oc					·			Email				
Complexion: Co				Color of eyes:			Weig	ht:	Height:			
Current address:										1		
City:	City:					County/Province:				State/Region:		
Country:	Country:					Continent:				Postal Code:		
CLUB INFORMATION (CURRENT) only one please												
Current Club:												
Club address:						Pos			Positio	sition/Designation:		
Phone: E-mail:					il: We			Web:	eb:			
ARNIS BACKGROUND (CURRENT)												
STYLE/SYSTEM:												
Name of Instructor,	/Guro:											
Started Arnis:						Current Rank in System	n:					
						iARNIS Bad	ckgrour	ıd				
						Have you taken: (Yes / No a	and Date)				
iARNIS Fundamental Course: iAl				iARNIS GURO Accreditation :			i	iARNIS Referee & Judges Accrediation:				
iARNIS Tournament Background (only sanctioned tournament/s by ARPI or iARNIS in the last 3 years)												
Tournament					Date (YYYY/MM/DD) Classific				on (eg. Participant, co	ach, medalist, T.O.)		

iARNIS Activity Background (only sanctioned Activitie/s by ARPI or iARNIS in the last 2 years)									
Name	Date (YYYY/MM/D		(participant, volunteer, speaker, delegate, instructor, etc)						
FAMILY INFORMATION									
Spouse's Name:									
Date of birth:	Phone:		Email:						
Father's Name:									
Date of birth:	Phone:		Email:						
Mother's Maiden Name:									
Date of birth:	Phone:		Email:						
Number of Children:									
Name of Ch	ild		Age						
AGREEMENT									
I hereby certify that the above information is true an									
shall abide by all the rules and regulations of Internasyonal, Inc. (iARNIS) & Arnis Philippines, Inc.	Arnis Pederasyong (ARPI). I also hereby	ereby							
absolve iARNIS & ARPI from any liabilities or responsibility injury sustained in Arnis related activities.	lities arising from any	Signature of Club President Sign above printed name							
injury sustained in Arns related activities.			Sign above princed name						
Signature of Applicant Sign above printed name		Signature of Club Sec. Gen. Sign above printed name							
FOR MINORS (APPLICANTS 17 YEARS OLD AND UNDER)									
With Consent and Approval		Signature of Parent/Legal Guardian							
		Sign above printed name							
Relationship to	Applicant:								

^{*}This form Must be Filled-Up completely and legibly. Signatures of applicant, club president and Sec. Gen are required for the processing of this application. (when sending via e-mail, photo and signatures must be uploaded on to it for the validation of your application)
*attach one government issued ID (driver's license, passport, Tax ID, voter's Id, or postal ID) for minors; school ID and Birth Certificate.