

USFMAF MEMBERSHIP APPLICATION

APPLICANT INFORMATION

Name:

Date of birth:

Phone:

Current address:

City:

State:

ZIP Code:

Email:

ORGANIZATION/SCHOOL

Name:

Address:

Email:

Website:

STYLE

Name:

Instructor:

RANK

Rank:

Years of experience:

COMPETITION

Are you interested in competition?

Do you have experience as a referee or judge in competition?

What disciplines have you competed in?

DO YOU WANT TO SPONSOR US?

Name:

Phone:

Address:

City:

State:

Zip:

CHILDREN IF MEMBERSHIP PRIVILEGES DESIRED

Name

Name

Name

Name

SIGNATURES

MEMBERSHIP PRICE: \$25.00 per year per person.

By becoming a member of USFMAF you will receive the discounted price at any USFMAF sponsored event or seminar. You will also receive a free USFMAF patch for each member.

Signature of applicant:

Date:

Membership: \$25.00 per year per person

By becoming a member of USFMAF you will receive the discounted price at any USFMAF sponsored event or seminar. You will also receive a free USFMAF patch for each member.



Make Check or Money Order payable to: USFMAF

Send Check or Money Order to:

**USFMAF
1418 W POPLAR
Stockton, CA 95203**