



INTERNATIONAL SUNGJA-DO ASSOCIATION

International Headquarters

137 Timberlake Dr., FLORENCE, SC 29501 USA

Telephone: 1-843-968-8178

ISA I.D. #: _____

Date of Birth _____

RANK CERTIFICATION APPLICATION

Name:(Last) _____ (First) _____ (NI) _____

Address: _____ City: _____ State: _____ Country: _____

Zip Code: _____ Telephone #: (____) _____ Age: _____

Martial Arts History: Date Started: _____ Style: _____

Your Present Rank and Style: _____ Date Received: _____

RANK YOU ARE APPLYING FOR: _____ COLOR OF BELT: _____

Instructor's Name and Rank: _____

Organization Issuing Rank: _____

Name of School Attending: _____

Own Teach Student
(Check Appropriate Box / Boxes)

RANK CERTIFICATION: (will receive Rank Certificate)(check one)

Color Belt: (8th Grade to 1st Grade)

Black Belt: (1st Degree to 7th Degree)

I hereby make application for the above name Individual's rank certification, in the International SungjaDo Association. I have taken a written and/or physical exam for this Rank. I accept all conditions and responsibilities for the above Rank. I sincerely pledge to obey all rules and regulations, which are set up for the purpose of keeping order of the Association and for the protection of students from injury.

Date _____ Applicant's Signature _____

Date _____ Instructor's Signature _____

Print this application and fill out. Send the appropriate FEE for your RANK certificate to I.S.A. Headquarters!

Make Business / Personal Checks or Money Orders payable to: **ISA MARTIAL ARTS**

**International Sungja-Do Association
I.S.A. MARTIAL ARTS
137 TIMBERLAKE DRIVE, FLORENCE, SC 29501**