



王冠 松涛馆空手国际

Wankan Shotokan Karate International

COACHING LICENCE EXAM FORM

Date :

Name :

Date of Birth : Nationality :

Contact / Address :

.....
.....

Contact No. :

WhatsApp No. :

E-mail :



I, hereby promise to obey
the rules and regulations of the WSKI

Recommended By : Signature of Applicant

Exam result :

Total marks :

.....
Signature of Examiner

.....
Verified by General Secretary

.....
Approved by Chairman

OFFICIAL USE

Reg. No.

Issued Date :

E-mail : wankanshotokan@gmail.com

www.wankanshotokan.com