

Black Sword Aikido

Level Test Application

I hereby apply to take the promotion test for the _____ level.

Name: _____

Street Address: _____

City/State/Zip: _____

Phone (home): () _____ Date of Birth: ___/___/___

Email: _____

Belt size: _____

My present level is _____ and was obtained on _____

I certify that my dues are current and I have paid the testing fee.

Applicant's Signature _____ Date: ___/___/___

Space below this line is for office use only

Test results: _____ Certificate issued: _____ Level

Pass Date Made: ___/___/___ Initials _____

Fail

Probation

Testing committee signatures:

Founder and Chief Instructor:

Joseph Caulfield