



# KUMA KAI

## Registration Form 2021/2022

NAME :

---

First Name :

---

Date of Birth :

---

Address :

---

Phone Number :

---

Email :

---

Annual fee : 10 euros

Licence number :

- I join the Kuma Kai Association

Place : \_\_\_\_\_ Date : \_\_\_\_\_

Signature

---

*KUMA KAI is a non profit association, organizing meetings, exchanges, seminars and classes on BUDO related topics.*

KUMA KAI  
11 RUE JUIVERIE, 69005 LYON - FRANCE

+33 6 64 46 02 54  
KUMACHAN@ALICEADSL.FR  
[HTTPS://KUMAKAISITE.WORDPRESS.COM](https://kumakaiste.wordpress.com)

Partners :



ATELIER  
SHIATSU