

# USA MARTIAL ARTS

## Black Belt Application for Promotion

PLEASE PRINT CLEARLY

USAMA ID# \_\_\_\_\_

Attach 2

Effective date \_\_\_\_/\_\_\_\_/\_\_\_\_ Expires \_\_\_\_/\_\_\_\_/\_\_\_\_

Photos Here

*(1/1/2006 must be a USAMA member a minimum of 6 months)*

1 inch x ½ inch

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First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Male \_\_\_\_ Female \_\_\_\_

Last Name \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_

Address \_\_\_\_\_ Belt Size \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Current Rank \_\_\_\_\_ Date of Last Promotion \_\_\_\_/\_\_\_\_/\_\_\_\_

Rank Applied For \_\_\_\_\_ Charter School Name \_\_\_\_\_

Name of Instructor (including Instructor Degree Title) \_\_\_\_\_

**I hereby recommend the person above as well qualified for the promotion of the black Belt rank applied for.**

Recommended by \_\_\_\_\_ Rank \_\_\_\_\_

First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Last Name \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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USAMA Office Use Only:

Date Applied \_\_\_\_/\_\_\_\_/\_\_\_\_ Certificate Verified \_\_\_\_ Certification Cost \$ \_\_\_\_\_

Paid : VISA \_\_\_\_ MC \_\_\_\_ DIS \_\_\_\_ Money Order \_\_\_\_ Cashier's Check \_\_\_\_