

## IKF LICENSED & ENDORSED KICKBOXING / MUAY THAI SCHOOL/CLUB/GYM REGISTRATION FORM

To become an **IKF LICENSED** and **ENDORSED** Kickboxing/Muay Thai School, Gym or Club On the **IKF GYMS** Directory Page, Please print off this application, complete and mail or fax, along with your lifetime (1 time) application fee of **\$250.00** (US) to the **IKF**. Your School/Gym/Club will be listed on the **IKF GYMS** Directory Page within 30 days if your School/Gym/Club has been **APPROVED** by the **IKF**. If your club is declined as an Officially Licensed & Endorsed **IKF** Kickboxing/Muay Thai School, Gym or Club, **you will be refunded the entire amount**. If Approved, you will receive an Official **IKF LICENSED** and **ENDORSED** Kickboxing/Muay Thai School Certificate to post on your Gym/Club wall.

**• To Be An IKF APPROVE and ENDORSE a Gym or a Club, The Gym/Club Must;**

1. Teach **COMPETITIVE** Kickboxing.
2. Be in Good **ETHICAL** Standings with the **IKF** AND The Sport of Kickboxing.
3. Have Students **ACTIVELY COMPETE** on **IKF** Events in their area when requested.
4. Be **QUALIFIED & EXPERIENCED** in the fighting Techniques of Kickboxing.
5. Have Professional Equipment for Professional Instruction & Training in the Sport of Kickboxing.



**PLEASE "PRINT" NEATLY**

1. **Your Gym/Club Name:** \_\_\_\_\_
2. **Physical Gym/Club Address. - The EXACT Physical location you teach at.**  
\_\_\_\_\_
3. **Gym/Club Website Address: WWW.** \_\_\_\_\_
4. **Gym/Club Mailing Address if Different.**  
\_\_\_\_\_
5. **Gym/Club Phone Number.** \_\_\_\_\_
6. **What RULE STYLE do you teach at your Gym/Club?**  
\_\_\_\_\_
7. **Do you teach COMPETITIVE Kickboxing and or Muay Thai?** \_\_\_\_ YES \_\_\_\_ NO
8. **If So, what events do you regularly participate in (Promoter, City, Sanctioning Body?)**  
\_\_\_\_\_
9. **Chief Trainers Name of The Gym/Club.** \_\_\_\_\_
10. **Chief Trainers TRAINING Background In Kickboxing and or Muay Thai. (Use back if necessary)**
  - \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_
11. **PLEASE LIST FOR US 3 REFERENCES**
  1. \_\_\_\_\_
  2. \_\_\_\_\_
  3. \_\_\_\_\_

**IF MAILING: Send this Form and your Gym/Club Listing Fee of \$250 to: IKF Attn: GYM REGISTRATION  
P.O. Box 1205, 9250 Cypress Street, Newcastle, CA, 95658, USA**

**IF PAYING BY CREDIT CARD AND FAXING IN FAX TO (916) 663-4510 - PRINT NEATLY!**

**YOUR STATEMENT WILL SAY "FOSTER GRAPHICS" WHICH IS OUR GRAPHICS DEPARTMENT**

CIRCLE OR CHECK ONE: <input type="checkbox"/> VISA -OR- <input type="checkbox"/> MASTERCARD		
CC#: _____	AMOUNT PAID	CARD EXP. DATE ____ / ____ / ____
PHONE: (____) _____	\$ _____	3 DIG SEC CD: ____ - ____ - ____
<b>www.IKFKickboxing.com - www.IKFMuayThai.com</b>		