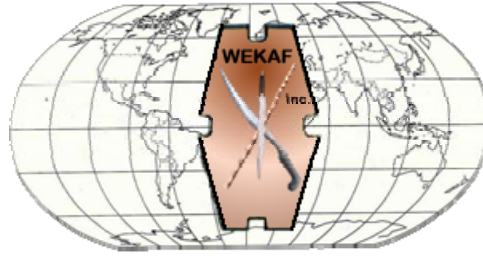


**World Eskrima-Kali-Arnis Federation**



**W.E.K.A.F. USA Inc. 2009  
School Membership Application Form**

School Name: \_\_\_\_\_

Owner/Instructor: \_\_\_\_\_

Address: \_\_\_\_\_

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

Style: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_

Fax Number: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Individual Membership fee: **\$50.00** (Payable to “WEKAF USA Inc.”)

**WEKAF USA Inc.** is a non-profit Organization whose sole purpose is to promote and support ALL STYLES of the Filipino martial arts. WEKAF is for the benefit of the participants who through membership will qualify for:

- Discount at WEKAF seminars and sanctioned tournaments.
- Access to WEKAF World Head Quarters in Cebu Philippines for training.
- Discounts on weapons and protective gear.
- Opportunity to qualify for the U.S. team, competing in the WEKAF World Championships
- ID Card.

Send To: **WEKAF USA Inc**  
**P.O. Box 32675**  
**San Jose, CA. 95152**

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Office use only

Method of Payment: \_\_\_\_\_ Amount: \_\_\_\_\_ Date Rec'd: \_\_\_\_\_ WEKAF #: \_\_\_\_\_

Contacts: \_\_\_\_\_