



GM Bernardo Fabia Salinas
Sinkatan Arnis International

Arnis Estrella Association

www.sinkatan-international.com

Email: infosinkatan@yahoo.com

Membership Fee

Individual Membership

\$35.00

School Membership

\$100.00

Membership Application

Name: _____ Status: _____

Age: _____ Date of Birth: _____

Contact Phone: (_____) _____
Area Code Number

Medical Plan #: _____ Height: _____. Weight: _____

Mailing Address: _____

E-mail Address: _____

Martial Arts: _____ Style: _____ Title: _____ Rank _____

School Academy: _____

School Address: _____

Instructor Name: _____ Phone: _____

Title: _____ Rank/Level: _____

I _____ agree (if accepted) to abide by all the by laws and rules set forth by the Sinkatan Arnis International, I also further acknowledge that contravention of these rules can and maybe grounds for termination of this membership.

X _____
Applicant Signature

X _____
Parent/guardian if applicant is under 18 years old

Date: _____

Date: _____

Remit with your payment to:
GM Bernardo Fabia Salinas
Sinkatan Arnis International
Mailing Address: 9514-102nd Ave. BC Canada V1J-2C6
Phone/Fax: (250)-787-7144 or Cell Ph. (250)-262-8216