

UNITED STATES JUDO, INC. MANAGER APPLICATION

Section I: Personal Information

Date of Application: _____

Revised : January 6, 2009

Name: _____
(First name) (MI) (Last name)

Address: _____

City: _____ ST: _____ Zip: _____

Phones: (home) _____ (work) _____

(fax) _____ (E-mail) _____

Rank: _____ USJI Membership # _____

Date of Birth: _____ Age: _____ Sex: M F

Dojo/Club: _____

Years in judo as a: Player: _____ Sensei: _____ Coach: _____

Section II: Managing Experiences				
A. List Previous and Current Local, Regional & National Managing Experiences				
Date	Dojo or Event Name	Location	Head Coach	
B. List Previous and Current International Managing Experiences				
Date	Event Name	Location	Head Coach	
CPR Exp.		BGSC:		

