



# UNITED STATES SHUAI-CHIAO ASSOCIATION

## Membership Form

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### NAME & ADDRESS:

Last: \_\_\_\_\_ First: \_\_\_\_\_ MI: \_\_\_\_\_

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

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

Country: \_\_\_\_\_ E-mail: \_\_\_\_\_

Home Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Work Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

### PERSONAL INFORMATION:

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Sex:  M  F Height: \_\_\_\_ ft. \_\_\_\_ in.

Weight: \_\_\_\_\_ lbs. Profession: \_\_\_\_\_

School or Company Name: \_\_\_\_\_

### TRAINING INFORMATION:

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

Instructor: \_\_\_\_\_ Styles: \_\_\_\_\_

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

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

Country: \_\_\_\_\_ Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Date Began Shuai-chiao: \_\_\_\_/\_\_\_\_/\_\_\_\_

We are also interested about any martial arts training that you may have received. On a separate sheet of paper, please include your history in the martial arts, including other styles (i.e. experience, rank, organizations, teachers), USSA accomplishments in rank, performances, teaching, and tournaments (i.e. place, level of tournaments, number of competitors).

### FEES:

#### Membership 2 years

Individual – \$20.00 (only with authorized Branch Holder signature – materials sent to member via branch holder)

Branch Holder Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Regular Individual – \$25.00  International Individual – \$30.00  
(materials sent directly to member)

#### USSA Merchandise (S&H Included)

Handbook – \$4.00  T-Shirt – \$15.00  Patch – \$5.00

Yes, please send me a product catalog.

Amount Enclosed: \$ \_\_\_\_\_

### USSA Official Information – Do not write below.

USSA#: \_\_\_\_\_ Date Applied: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Expiration: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Rank: \_\_\_\_\_ Authorization: \_\_\_\_\_