

I.H.H.H.F EXAMINATION

Please fill out the form and send by email. We look forward to seeing you!

I.H.H.H.F - Examination STYLE :	
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Place of ex.:	
Type	Kup / Kyu DAN
I.H.H.H.F-Association/-Dojang:	
Name participant:	
Date of birth:	
Nationality:	
E-MAIL Adress:	
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For fees and pricing information, please contact the office of the I.H.H.H.F.: Bruchhausener Straße 29, D-59759 Arnsberg, Salvatore Tiso.