



International Modern Arnis Federation, LLC

Remy Presas' Modern Arnis

IMAF, LLC 12 Cherokee Court, Cromwell, CT 06416, USA - Telephone (734) 635-0887 - www.MastersOfTapiTapi.com

Individual Membership Application Form

MEMBERSHIP TYPE*

1-YEAR BASIC MEMBERSHIP

NEW APPLICATION – \$55 (first year of membership only)

RENEWAL APPLICATION – \$35 (per year)

PREMIUM MEMBERSHIP

LIFETIME MEMBERSHIP – \$500 (onetime fee). Individuals will receive the following **premium** benefits:

- A one of a kind stick signed by each of the Masters
- Lifetime membership with IMAF, LLC

V.I.P./ELITE MEMBERSHIP – \$750 (onetime fee). Individuals will receive the following **premium** benefits:

- A handcrafted IMAF signature training blade
- A one of a kind stick signed by each of the Masters
- Lifetime membership with IMAF, LLC

* All members are eligible to receive a 10% discount at all IMAF camps

Affiliated Member Club: _____

Applicant's Name: _____
(Please print BLOCK letters) (First Name) (Last Name)

Address: _____ **City:** _____
(Street #) (Street Name) (Apt #)

State/Province: _____ **Zip/Postal Code:** _____ **Country:** _____

Phone # (home): _____ **Phone # (mobile):** _____
(Area Code) (Local #) (Area Code) (Local #)

Date of Birth: _____ **Gender:** **Male** **Female**
(DD/MM/YYYY)

E-mail: _____

IMPORTANT

1. Provide to your **AFFILIATED MEMBER CLUB** or mail directly to **IMAF, LLC** the completed application form with your **1-YEAR BASIC** or **PREMIUM** membership fee.
2. Make cheques payable to IMAF, LLC, 12 Cherokee Court, Cromwell, CT 06416, USA.
3. **NEW MEMBERS** must submit the **NEW APPLICATION** membership fee (\$55 for the first year of membership); the **RENEWAL APPLICATION** fee is to be submitted every year thereafter (\$35 per year for all subsequent years after initial registration). **PREMIUM MEMBERSHIP** owners must submit a onetime fee only.
4. It is the responsibility of all members to accept and agree to abide by the IMAF, LLC Code of Conduct for the tenure off their membership.

I have thoroughly read and accept the IMAF, LLC Code of Conduct: **YES** **NO**

Signature: _____ **Date:** _____
(Applicant or Parent/Guardian if applicant is under 18 years of age) (DD/MM/YYYY)