

Information: E-mail Address____ Birth date Age **Martial Arts Experience:** Style_____ School_____ Years Studied _____ Rank___ Style_____ School_____ Years Studied____ Rank_____ Years Teaching (teachers) Years in the White Lotus Association Registration: Student (\$25.00) _____ Teacher (\$35.00) _____ Date of Registration (Membership is 1 year from date) I agree to the ideals of the White Lotus Association and will support other martial art schools and systems within the White Lotus Association. I will follow the codes of love, faith, honor, and courage. I will strive to exemplify the martial arts for my school, my teachers and myself by seeking peace and being a warrior with compassion. Date_____ Signed_____