



Chapter Application
Royce Gracie Jiu-Jitsu Network™

Name (last, first)

Name of School/Organization

Street Address

City State Zip Code

Phone Number

Fax Number

E-mail address

How long have you been training Jiu-Jitsu? _____

What belt are you? _____

Who promoted you? _____

Do you have access to matted facility? _____ If so, what is the square footage? _____

Are you a martial arts instructor? _____

Are you an owner of a martial arts school? _____ If so, do you have liability insurance? _____

How many students do you have? _____

Have you ever been a member or a part of another Jiu-Jitsu organization? _____
If so, which one? _____

Signature of Applicant

Date

Mail to: KhonKhor Enterprises, Inc., P.O. Box 10346, Torrance, CA 90505 (310) 316-4579, (310) 316-7411fax