



# White Lotus Association Membership Application

## Information:

Name \_\_\_\_\_ Home/Cell Phone \_\_\_\_\_  
Parents (for Children) \_\_\_\_\_ Work/Cell Phone \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
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.*

Signed \_\_\_\_\_

Date \_\_\_\_\_

Please print out this Application, fill it out and mail it to:

Rising Dragon Martial Arts  
3429 West Greenfield Avenue  
Milwaukee, Wisconsin 53215