



Mid-America Exam & ISKF Reporting Form



Club Name: _____ Date Submitted: _____ Examiner: _____

Check all that apply: Kyu Exam ISKF Renewal Exam Date: _____

	Students Name	Start Date	Current Rank	Promoted Rank	ISKF Number	ISKF Status	ISKF Fee	Kyu Certificate	Examiner Fee
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									
16									
17									
18									
19									
20									
21									
22									
23									
24									
25									

Total ISKF Fees: \$0.00

Mileage Calculator: _____ Miles x .20 per mile = \$0.00

Total Testing Fees: \$0.00

Clinic Calculator: _____ Hours x \$100 per hour = \$0.00

Certificate Fees: \$0.00

Per Diem: \$0.00

Per Diem Calculator: _____ Days x \$85 per day = \$0.00

Hotel: \$0.00

Mileage: \$0.00

Clinic Fee: \$0.00

PayPal: _____

Examiner Fee Calculator: Adults: \$20 each Youth: \$15 each

Total Enclosed: **\$0.00**

Check # _____

Kyu Certificate Fee: \$10 ea.

Submitted by: _____

Notes: