 **SIM UU**

 **TILMELDING TIL DANGRADUERING**

 **PERSON-OPLYSNINGSSEDDEL**

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| **Navn:**  |  | **DtaF licensnr.:** |  |
| **Adresse** |  | **Kukkiwon Licensnr.:** |  |
| **Postnr. + By** |  | **Kukkiwon licensdato:** |  |
| **Mail adresse:** |  |  |  |
| **Tlf. nr.** |  | **Fødselsdato:** |  |

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| **Klub:** |  |  **Køn:** |  | **M:** |  | **K:** |  |

**Gradueringsdatoer:**

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| --- | --- | --- | --- | --- | --- |
| **1. Kup:** |  | **1. Dan/Poom:** |  | **2. Dan/Poom:** |  |
| **3. Dan/Poom:** |  | **4. Dan/Poom:** |  | **5. Dan:** |  |
| **6. Dan:** |  |  |  |  |  |

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| --- | --- | --- | --- |
| **Nuværende grad:** |  | **Ønskede grad:** |  |

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|  | **Sim Uu certifikat** |  | **Kukkiwon certifikat** |

**VIGTIGT!!! - FOTOKOPI AF LILLE KUKKIWON-CERTIFIKAT SKAL VEDLÆGGES DENNE TILMELDING**

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**JEG HAR LÆSE/SKRIVE PROBLEMER OG BRUG FOR HJÆLP TIL DEN SKRIFTELIGE TEORIPRØVE**

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| **Kroniske sygdomme:** |  |
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| **Medicinering:** |  |
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| --- | --- | --- | --- | --- | --- |
| **Ønsker overnatning fredag/lørdag/søndag:** |  | **Ja:** |  | **Nej:** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Indstillet af:** |  | **Gradueringsnr.:** |  |

|  |  |
| --- | --- |
| **Betalt kr.:** |  |

**Klubbens kontaktperson:**

|  |  |  |
| --- | --- | --- |
| **Navn** | **Adresse** | **Tlf:** |
|  |  |  |