



DEPARTMENT OF REVENUE AND TAXATION
GOVERNMENT OF GUAM
**MARTIAL ARTS
REGISTRATION FORM**

Pursuant to Title 10 Guam Code Annotated, Chapter 62

**REGISTRATION FORM FOR KARATE, JUDO, AIKIDO OR ANY SIMILAR
PHYSICAL EXPORT**

Name: _____

Social Security No: _____ or Driver's License No: _____

Height: _____ Weight: _____ Color of Hair: _____ Color of eyes: _____

Residence Address: _____

Mailing Address: _____

Telephone No.: _____ Other contact No: _____

Master in the art of: _____

in which my HANDS _____ FEET _____ BOTH _____ are
used as deadly weapons.

Signature

Date of Registration