

Australasian Martial Arts Hall of Fame



AMAHOF Inc.

Application for recognition of Spouse or Partner
in support of an AMAHOF member.

Name of proposer and membership Number	
Name of Nominee	
Number of years (15+)	
Art supported	

Contact details;

Address; _____
_____ Postcode _____

Email: _____

(please write clearly)

Phone; _____ Mobile; _____

Criteria: Member must be financial when making nomination.

Minimum 15 years continuous support by spouse / partner.

Certificate will only be presented at a AMAHOF Induction Dinner.

This is not a membership to AMAHOF. It is a recognition of support.

No fee required! Closing date for this year; 25th June 2021

Signature of Member _____

Date _____

Send original hard copy to ;Master Steven Weston, Secretary AMAHOF Inc.
4 Rennie St. West Hobart, Tasmania 7000