**Form No. 3**

**KHF MASTERS COURSE CERTIFICATE OF COMPLETION**

**Please fill up and send to hapkikwan@gmail.com before April 25, 2023
Important: Only holders of KHF 4th Dan and above!**

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| --- | --- | --- | --- | --- | --- |
|  | **Given name****FAMILY NAME** | **Date of Birth** | **Mailing** **Address with COUNTRY** | **E-mail &** **Phone**  | **- Your present KHF Dan** **- No. of Certificate****- Issued on** |
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Date .................