

Guidelines and definitions for the application for **local license** (1st January 2014 stood)
only for
**Austria, Belgium, France, Ireland, Malta, Netherlands, Switzerland,
Nordic Countries, United Kingdom**

- > The applicant is committed to complete the application fully and truthfully.
- > **The applicant must have a valid license (D)** or will be sought through ongoing training package. This must be accompanied by a copy. (This must be renewed every 2 years.)
- > The applicant must be able to teach qualified **EBMAS** Wing Tzun and / or Latosa Weapon System, in the proposed location / territory.
- > The reserved place / area must be active within 6 months and must not be represented by a pre-existing **EBMAS** school / club.
- > If the applicant does not succeed, to open a group during this period, this area is re-released.
- > For sales, transfer and / or re-allocations of local- / territorial protection must be given permission from the **EBMAS** headquarter.
- > **EBMAS** reserved all rights; other arrangements should be interned in writing and signed by Sifu Emin Boztepe.
- > The contract is for an indefinite period. **EBMAS** headquarter requires 2 months notice to before the renewal date to terminate a licence.

The licences right is not valid for the Police, Military, University, religious facilities and other national facilities, Company and allied Company (like BMW or similarities)

Local licenses are awarded according to population. Places that have less than 50 000 inhabitants or more than one postcode will be separated in postcode -areas.

Has a location not more than 50 000 inhabitants, there is only allowed one EBMAS Wing Tzun and one Latosa Weapon System school. At locations with more than one postcode, must be requested a postcode- area (e.g. 10179 Berlin). It will then be awarded accordingly.

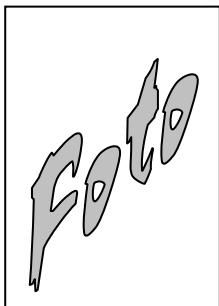
All changes (e.g. relocation of the school or promotional activities, etc.) need to be announced 1 month in advance, in the EBMAS headquarter.

I have read the rules and provisions of this contract and agree with them.

The next located EBMAS-Clubs with Groups leader! (Please put the Zip code, Place name and Groups leader name)

Zip code / Place _____ Group leader _____

Zip code / Place _____ Group leader _____



City / Date

Signature / local - licensee

Local reservation under

EBMAS / GREY HILLS GMBH

Heinrich Heine Platz 9 / 10179 Berlin / Germany

Fon: +49-30-240 85 440 / Fax: +49-30-240 85 539

E-Mail: hqeuropa@ebmas.net / Website: www.ebmas.net

USt-Ident-Nr.: 37/124/20988 / Sales tax -ID-Nº.: DE 240 812 515

Last Name, First Name _____
EBMAS - Membership Nr. _____ Sifu Yes / No _____
 Classification Wing Tzun _____ Classification Escrima _____
 Zip Code / Place _____ Country _____
 Street _____
 Phone _____ Fax _____
 E-Mail _____ Website _____

I have registered other group's (Specify with Zip code)

The desired Place with Zip code (Only completed application can be recognized!)

Zip code/ Place _____ National /Country _____
 State _____ ca. Resident _____

Fighting Style / s, which should be taught (Please check field)

- Wing Tzun: monthly € 40.00 only Latosa Weapon System: monthly € 40.00
 Wing Tzun & Latosa Weapon System: monthly € 60.00

Please do not apply any License fee for Children / Women / Seniors Clubs in EBMAS WT or Latosa WS. (It has to be a EBMAS WT or / and Latosa WS registered)

Time and notice

The contract is for an indefinite period. EBMAS headquarter requires 2 months notice to before the renewal date to terminate a licence..

Fee

Payment of the monthly fees to the EBMAS account via bank transfer or PayPal.
 The local license fees adjust automatically to the current EBMAS price list. The amounts. The amounts include the sat. VAT of 19%.

The contract is a permanent account (German Sales Tax Law, i.S.d. UstG).
 Our Ust.Nr.: 37/124/20988 / Jurisdiction: Berlin, Germany

Application Notice (This part is to be completed from EBMAS Office)

- The application will be approved on condition that the information from the applicant are complete and true!
 The applicant is asked to contact us.
 The application cannot be approved.
 Others _____

Date _____ Signature _____
 (By Sifu Emin Boztepe representative EBMAS agent Stamps)

To publication on our Web side/ (School Information)

Place with Zip code (School!) _____
 Street _____
 Contact Person _____
 Phone: _____ E-Mail: _____

hours of opening

You can publish your Picture in the Web side, a bow your School registration. Please send the photo data.

Day	Class time	Class for

I hereby agree the license application for the listed location. The current guidelines to the local reservation (see back) are known to me. My information is complete and truthful!

Date _____ Place _____ Signature Licensee _____

- The monthly local license fees shall be collected when due to the expense of my checking account by SEPA direct debit.**

SEPA Direct Debit Mandate: EBMAS / Grey Hills GmbH, Heinrich-Heine-Platz 9 / D-10179 Berlin
 Creditors Ident **DE 36ZZZ0000317674**

The mandate reference = Your future contract number, this is served on the first SEPA - direct debit.

Surname / First Name of the account holder _____

Herewith I give the EBMAS/Grey Hills GmbH a direct debit authorization.

I hereby give my credit institution the order, to redeem the direct debit by the EBMAS / Grey Hills GmbH.

Bank _____

IBAN: ____|____|____|____|____|____|____|____|____|____|____|____|____|____|____|____|____|____|____|____|____|____|

BIC: ____|____|____|____|____|____|____|____|____|____|____|____|

Date _____ City _____ Signature _____

(This part is to be completed only from EBMAS Office staff)

- Copy conveys to the Applicant
 Application processing in the databank
 Application processing in the School listing
 Copy the Application in the file
 Others _____

Contract No:

Date _____ Signature _____
 (By Sifu Emin Boztepe representative EBMAS agent Stamps)