



Okinawa Karate Kobudo Kai
Kodomo Martial Arts Program

Certificate of Rank

This is to certify that

*Has completed the required training
in the Kodomo Martial Arts Program*

*The above named individual is hereby awarded
the rank of*

Kodomo -

On the _____ Day of _____ in the Year _____

*Hereafter promises to continue to improve his/herself physically and
morally through the daily study and practice of this Martial Arts.*

**CHIEF INSTRUCTOR
OKINAWA KARATE KOBUDO KAI**