

Taekwondo NB Athlete/Coach Subsidy Request Form

Name: _____

Address: _____

City: _____ Postal Code: _____

Phone (H): _____ (W): _____

E-Mail: _____

Date of birth: Day _____ / Month: _____ Year: _____

Kukkiwon No.: _____ TKDNB No. _____

Current Belt: _____ Instructor: _____

TKDNB School: _____

Name of Competition: _____

Date of Competition: Day: _____ / Month: _____ Year: _____

Location of Competition: City/Country - _____

Competed as: Junior A () Senior ()

Tournament Results: Gold () Silver () Bronze () Did not Place ()

This application must be filled out and returned to the Treasurer of Taekwondo NB Inc. no later than sixty (60) days after the competition date. Failure to do this will result in no funding.

I hereby certify that the information above and competition and participation are true and accurate.

Athlete/Coach Signature: _____

Dated: Day: _____ / Month: _____ Year: _____



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For Office use only

Date received: _____

Athlete/Coach Sponsorship () or Athlete/Coach Subsidy ()

Board approval: Day: _____ / Month: _____ Year: _____

Board Meeting () Via E-mail ()

Accepted () Rejected ()

Signed: _____