

# TAEKWONDO NB SCHOOL SACTIONING REGISTRATION FORM

Taekwondo NB school instructors must complete and mail this application along with the Taekwondo NB school membership applications and fees to the address below **before September 30<sup>th</sup>** o register your school with Taekwondo NB for the new year. (Taekwondo NB schools that do not begin until after September 30<sup>th</sup> must still mail this completed application **before September 30<sup>th</sup>** and indicate the start up date of the school. The school then has thirty days from this start date to remit Taekwondo NB's membership applications and fees). **Please Print Clearly.**

W.T.F Taekwondo School Name: \_\_\_\_\_

Taekwondo School Start up date: Day: \_\_\_\_\_ Month: \_\_\_\_\_ Year: \_\_\_\_\_ /OR Full Time ( )

Taekwondo School Address: \_\_\_\_\_

City/Ville: \_\_\_\_\_ Postal Code/Postale: \_\_\_\_\_

Taekwondo School Phone #: \_\_\_\_\_ Cell/Fax #: \_\_\_\_\_

Instructor/Instructeur: \_\_\_\_\_

Instructor's Date of Birth: Day: \_\_\_\_\_ Month: \_\_\_\_\_ Year: \_\_\_\_\_

Instructor's Address: \_\_\_\_\_

City/Ville: \_\_\_\_\_ Postal Code/Postale: \_\_\_\_\_

Home phone #: \_\_\_\_\_ Cell #: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Instructor/Instructeur rank: \_\_\_\_\_

Kukkiwon Certificate #: \_\_\_\_\_

Photo copy of kukkiwon certificate to be returned with this registration form

NCCP Certificate #: \_\_\_\_\_

Instructors of taekwondo NB schools must have their NCCP level one theory – send photo copy of certificate

Instructor's Master Instructor: \_\_\_\_\_

### **Indicate where you want correspondence mailed:**

Taekwondo School Address ( )

Instructors Address ( )

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### **For Office Use Only**

Date Received: Day: \_\_\_\_\_ Month: \_\_\_\_\_ Year: \_\_\_\_\_

School: Accepted ( ) Rejected: ( )

Comments: \_\_\_\_\_

