TAEKWONDO NB APPLICATION FORM / D'APPLICATION (PLEASE PRINT / IMPRIMER S.V.P.) Membership expiration date is August 31 of every year - Registration Fee \$20

ATTENTION: THIS FORM IS USED FOR ALL MEMBERS INCLUDING AFTER SCHOOL / DAYCARE / PICKUP TAEKWONDO PROGRA

CITY / VILLE:		_POSTAL CO	DE / POS	STALE:		
ΓELEPHONE #:	E-M	1AIL:				
DATE OF BIRTH / DATE DE NA	AISSANCE: Day _		Month		Year	
ΓK D SCHOOL NAME / NOM I	DE L'ECOLE :					
RANK / RANG :		KUKKIW	ON CER	Γ#		
	(black belts	must provide a pho	to-copy of t	their kukkiwon certifi	cate)	
REFEREE CLASS:						
NB COACHING LEVEL / NIVE	AU D'ENTRAINEU	R NB:				
ļ,	, hereby apply for m	embership into	TAEKWO	ONDO NB at		
TKDNB. I agree to allow the right	s of these photos to	be used by T	KDNB. I	also understand	that some of this in	formation may
understand this application is for TKDNB. I agree to allow the right shared with the National Affiliate T to be accepted and for insurance eighteen).	s of these photos to aekwondo Canada,	o be used by T and do agree to be signed by th	KDNB. I b let TKDI ne instruc	also understand NB share this info ctor and applican	that some of this information with them. Fit (parent/guardian if	formation may or this applicate
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