



**GENERAL MEMBERSHIP APPLICATION**

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Date Of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

**Martial Arts Background**

Present Rank/Dan/Grade: \_\_\_\_\_ Received On: \_\_\_\_\_

Instructor & His/Her Rank: \_\_\_\_\_ School Name: \_\_\_\_\_

School Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**List Promotion in Order of Highest Rank**  
**Rank & Belt/Promotion Date/School/Instructor & Rank**  
Use additional paper if needed

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

**Forms Trained In**

Palgwe: \_\_\_ Tageuk: \_\_\_ WTF/WTA: Dan \_\_\_ ITF \_\_\_ Tang Soo Do \_\_\_

Signature Of Applicant/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

\* Annual Membership Cost: \$50 \*

**Send Payment To: Richard Chun Taekwondo Headquarters  
P.O Box 4332 Wayne, New Jersey 07470**