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| 7-24-2013 1-57-37 PM.jpg *ABN: 61 535 890 915***TKD - SPORTS TAEKWONDO****MEMBERSHIP APPLICATION FORM - 2018****Individual****ADULTS : $100** **KIDS (UNDER 18) :$70**  |  |
|   |
|  |
| Club/Organisations Name:  **DOS TAEKWONDO** |
|  |
| Instructors Name:  **SERDAR GUNER** | Contact (Mob):  **0425 324 443** |

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| STA & WTF MEMBERSHIP (INSURED) - 12mth fee, all ages, 1 February 2018 – 31 January 2019  |  |  |
|  |  |  |
| STA & WTF MEMBERSHIP (UNINSURED) - 12mth fee, all ages, 1 February 2018 – 31 January 2019  |  |  |
|  |  |  |
| Membership Category:  | Head Instructor  |  |  |  |  |  |  |  |
| (Please tick) |  |  |  |  |  |  |  |  |
|  | Instructor  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  | Coach  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  | Athlete  | *Kyorugi*   |  | *Poomsae*  |  | *Both* |  |  |
|  |  |  |  |  |  |  |  |  |
|  | Referee  | *International* |  | *STA*  |  | *Both* |  |  |
|  |  |  |  |  |  |  |  |  |
|  | Poomsae Judge  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Surname: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |
| Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Nationality: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Gender (M/F): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  (dd/mm/yy) |  |  |
|  |  |  |
| Street Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |
| Suburb: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Postcode: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  |  |
| Moblie Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  |
| Current Rank: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Kukkiwon Rank: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  (All Black-belts, if applicable) |  |  |
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| **DECLARATION** |
| I,\_*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby wish to apply for membership of TKD - Sports Taekwondo Australia and DOS TAEKWONDO acknowledge that I do so of my own free will or that I am authorised on behalf of the above named club or organisation to do so. I acknowledged that in applying to be a member of STA, I / the club or organisation is subject to the Statement of Purposes and Rules of TKD - Sports Taekwondo Australia & DOS TAEKWONDO and its policies, regulations and by-laws. I declare that the information I have supplied in this application is true and correct. I ha*v*e enclosed payment (cheque / money order) for membership to DOS TAEKWONDO | TKD – Sports Taekwondo Australia.*  |
|  |
| *Signa*ture : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  |
| Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
|  |  |
| Signature of Parent / Guardian (if under 18years): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  |
| Please Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Contract No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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