1207 W. Main St.., Peoria, Illinois 61606



(309) 673-2000 FAX (309) 673-0212 APPLICATION FOR UNIVERSAL TAEKWONDO MEMBERSHIP

전세계 태권도 협회

Name	Cast	oate of Birth	onth Day	Year
Mailing AddressStreet Addre		City	State	Zip
PhoneArea Code Numb	Work Ph	One Area Code	Number	
Name of School Attending		Own 🗆 Tea Check A	ACh Stud	dent 🗌
AddressStreet Address		City	State	Zip
Date	Instructor's Name		Middle f the contents of the	Last
PART B / TAEKWONDO RE	SUME			
Present Rank	Cert. No	Date		
Experience in TaeKwonDo:	Years	Months St	udy	
Occupation	Hobbies	<u>. </u>		
Do you plan to open your own so	chool?———————————————————————————————————	No		
Your Goal in TaeKwonDo				
PART C / IF YOUR APPLICA Enclose the total amount of all ite Annual membership dues includaction poster of master Soo Kon School Charter	ems checked below. de registration of rank, UTA Kim, UTA Events, and test	Patch, Membersing in UTA Schoo	hip Card, an e	exciting 5.00
PART D / ADDITIONAL INFO				
	Background—Teaching Ex so use this space to respon		В	