



ITF AMERICA FOUNDATION INDIVIDUAL STUDENT APPLICATION

Make checks payable to:
ITF America Foundation

Membership Fee:
\$40

Mail application and payments to:
ITF America Foundation
1016 11th Street
Hood River, OR 97031

Personal Information

Date: _____

First Name: _____ Last Name: _____

Male: Female: Date of Birth: _____ Age: _____

Belt (Color/Stripe): _____

If Black Belt: Degree: _____ BB#: _____ Promotion Date: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

Signature _____

Dojang Information

Dojang Name

Address: _____ City: _____ State: _____ Zip: _____

Dojang Phone: _____ Fax #: _____

E-mail: _____ Website: _____

Head Instructor: _____ Rank: _____

Black belts coming from other Associations / Federations (non-ITF) must attach a detailed resume of your Taekwon-Do experience, photocopies of your most recent rank certification, and one passport size, color photo for your membership card.

Forms may be emailed to dkerner@itfamerica.org

Payments can be made by check (mail) or credit card (phone)