

## MARYLAND STATE TAEKWONDO ASSOCIATION MEMBERSHIP APPLICATION APPLICATION INFORMATION LAST NAME: FIRST NAME: MI: PARENT NAME (if under 18): HOME ADDRESS: CITY: STATE: ZIP: HOME PHONE: CELL PHONE: EMAIL: TAEKWONDO PERSONAL INFORMATION (complete all applicable information) DAN/KUP RANK: T-Shirt SIZE: S M L XL KUKKIWON # (if black belt): USAT AAU MEMBER # MEMBER # COACH LEVEL: COACH # REFEREE LEVEL AND # REFEREE LEVEL AND # TAEKWONDO CLUB INFORMATION HEAD COACH NAME: CLUB NAME: ADDRESS: CITY: STATE: ZIP: PHONE: FAX: EMAIL: COMMITTEE INTEREST TOURNAMENT FINANCIAL MEMBERSHIP REFEREE COACH ATHLETE OTHER NATIONALS MEMBERSHIP BOARD OF GOVERNORS (if at least $1^{st}$ dan, at least 18 years old, and Maryland resident) AFFILIATE (all others who are not Board of Governors eligible) CLUB please enclose a \$20 application fee check made out to "Maryland State Taekwondo Association" SIGNATURES I certify that the information provided on this form is true and accurate. SIGNATURE OF APPLICANT: DATE:

DATE:

SIGNATURE OF PARENT (if under 18):



## MARYLAND STATE TAEKWONDO ASSOCIATION



## MARYLAND STATE TAEKWONDO ASSOCIATION UNIFORM APPLICATION TAEKWONDO PERSONAL INFORMATION (complete all applicable information) Please Select UNIFORM SIZE: AGE: Color Belt Black Belt USAT QUALIFIER AAU QUALIFIER QUALIFIER NAME: QUALIFIER NAME: STATE: STATE: EVENTS QUALIFIED IN PLEASE CIRCLE PLACE EVENTS QUALIFIED IN PLEASE CIRCLE PLACE 1. Place: 1st, 2nd, 3rd Place: 1st, 2nd, 3rd 1. 2. Place: 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup> Place: 1st, 2nd, 3rd 2. 3. Place: 1st, 2nd, 3rd 3. Place: 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup>