



International Taekwon-Do Federation Of B.C.

11033- 237th St. Maple Ridge, British Columbia, Canada. V2W 2E2
Phone: 778-580-8184 email: treasurer@itfobc.com

School/Club Application for Membership International Taekwon-Do Federation of B.C.

Date: _____
(MM/DD/YYYY)

Contact Information:

Name of School/Club: _____

Address of School/Club: _____
Street, City, Province, Postal Code

Phone Number(s): _____ Website: _____

Owner/Chief/Head Instructor: _____

Current Affiliation(s): _____
Provincial, National, International affiliations.

Current Number of Students _____ Current Number of Active Black Belts _____

Head/Chief Instructor Information:

Name: _____ *Rank & ITF Dan # _____

*if not a 4th Dan or above & an International Instructor please advise Name of supervising Instructor and info **as well as your info.

**ITF Plaque # _____ **Intl Instructor # _____ **E-mail _____

**Phone # _____ **Date of Birth: _____
MM/DD/YYYY

I, being of, or over the age of 19, hereby apply to become a School/Club Membership in the International Taekwon-Do Federation of B.C. (ITF of B.C.)

I, personally and in the operation of my School/Club do hereby agree to uphold the Constitution of the ITF of B.C., to comply with the Bylaws, as well as the Rules & Regulations of the ITF of B.C., and to pay any and all Membership fees as may be assessed by the ITF of B.C.

Signature: _____ Date: _____

Approved and accepted by the Board of Directors:

Per: _____ Date: _____