

APPLICATION FOR MEMBERSHIP
PLEASE PRINT OR TYPE

Date: _____ / _____ / _____

I. ABOUT MASTER / CHIEF INSTRUCTOR

NAME: _____ M ? F? DOB: _____ / _____ / _____

HOMEADDRESS: _____

HOME PHONE NO.: () _____

CURRENT TANG SOO DO RANK: _____ DAN YOUR DAN NUMBER: _____

TEST DATE OF CURRENT DAN: _____ / _____ / _____

WHAT FED. /ASSOC. TESTED YOUR CURRENT DAN: _____

FEDERATION/ASSOCIATION PRESIDENT NAME: _____

TEST DATE OF 1ST DAN: _____ / _____ / _____ DAN NUMBER: _____

WHAT FED. /ASSOC. TESTED YOUR 1ST DAN: _____

FEDERATION/ASSOCIATION PRESIDENT NAME: _____

II. ABOUT TANG SOO DO SCHOOL

SCHOOL NAME: _____ DATE OF OPEN SCHOOL: _____ / _____ / _____

HOW MANY STUDENTS: _____ HOW MANY BRANCH SCHOOLS IN THE USA: _____

SCHOOL ADDRESS: _____

TELEPHONE: () _____

PREVIOUS FED. / ASSOC. NAME: _____

ADDRESS: _____ PHONE: _____

PRESIDENT NAME: _____ RANK: _____

HOW LONG STAY THIS FED / ASSOC: Year: _____ Month: _____

Continental Tang Soo Do Federation Joining Requirements:

1. Membership application.
 2. Current black belt rank certificate copy.
 3. 1st Degree black belt rank certificate copy.
 4. If you have branch school: Schools name, address, phone number, instructor and rank.
 5. Five pictures (3 Cm x 4Cm). Instructor or Master
 6. Joining Fee
- * **All requirements are met and the union accepts your application you will be informed by letter or E-Mail**