

INDIVIDUAL MEMBERSHIP

APPLICATION FORM

APPLICATION STATUS	
New Renewal on time Renewal 1-3 months la	ate Renewal more than 3 months late
Member N ^o M Expiry	y date
(leave blank if new member)	DD/MM/YYYY (leave blank if new member)
MEMBER INFORMATION	
Surname	
Forename(s)	
Address	
Address	
Town/City	Postcode
Telephone - home	Ex Directory Yes No
Telephone - mobile	
Email (Compulsory)	
Date of birth Gende	er Male Female
Disability or medical condition (if applicable) Yes	No (Please give full details on back of form.)
Nationality	
Current grade Kup Poom Dan 1	2 0 3 0 4 0 5 0 6 0 7 0 8 0 9 0 10 0
Date of Last Grading	BT Cert Nº
Examiner Name	
DECLARATION I acknowledge that I have been informed of the potential risks of p	practising Taekwondo. I apply for membership of British
Taekwondo and agree to comply with the rules and regulations of	
Signature	Date
(Applicants if 18 or over / Parent Guardian if under 18	8)
INSTRUCTOR DECLARATION	
I confirm that this application has been submitted to Membership S accordance with British Taekwondo rules and regulations.	Services within 7 days of the applicant signing the form in
Club Nº	
Club name	
Instructor name	
Signature	Date
DATA PROTECTION If you do not wish your information to be shared with any third parties,	please click/tick the box on the right.

Your information will be used by British Taekwondo for providing membership services and administration and insurance purposes. Members must be given their membership book within 28 days of submitting their application to the instructor.