



YOM CHI TAEKWON-DO ASSOCIATION® MEMBERSHIP APPLICATION

PRINT OR TYPE
<http://www.YOMCHI.org>

DATE: _____

NEW MEMBER **RENEWING** – Y.C.T.A. MEMBERSHIP NUMBER _____

CURRENT RANK _____ GUP/DAN _____ EMAIL ADDRESS _____
Circle one

ALL RENEWALS MUST BE RECEIVED BY THE NATIONAL MEMBERSHIP DIRECTOR BY SEPTEMBER 30TH. YEARLY MEMBERSHIPS ARE \$30/MEMBER. ADDITIONAL FAMILY MEMBERS ARE HALF PRICE. PLEASE CHECK WITH YOUR INSTRUCTOR FOR OTHER FEES AND DISCOUNTS. RENEWALS RECEIVED AFTER SEPTEMBER 30TH REQUIRE A \$5 LATE FEE.

AMOUNT ATTACHED \$ _____
If you are claiming a family discount please print the family member and membership number. If all family members are newly applying just enter the name

FAMILY MEMBER _____ FAMILY MEMBER Y.C.T.A. Number _____

APPLICANT

PARENT/GUARDIAN IF UNDER 18

NAME _____ NAME _____

SIGNATURE _____ SIGNATURE _____

IF YOU ARE NEW TO YOM CHI OR IF ANY OF YOUR INFORMATION HAS CHANGED PLEASE FILL OUT THE FOLLOWING SECTION:

ADDRESS _____ CITY _____

STATE _____ ZIP _____ PHONE _____ M/F _____ D.O.B. _____
MM/DD/YYYY

SCHOOL _____ INSTRUCTOR _____

IF YOU ARE APPLYING FOR NEW/FIRST TIME MEMBERSHIP AS ANY OTHER RANK THAN A WHITE BELT YOU MUST ATTACH A COPY OF YOUR LAST RANK CERTIFICATION

**MAKE CHECKS PAYABLE TO YOUR YOM CHI STATE ADMINISTRATOR
ALL APPLICATIONS MUST BE SUBMITTED THROUGH YOUR YOM CHI STATE ADMINISTRATOR**

Note: YOM CHI TaeKwon-Do Association® reserves the right to refuse membership to any individual, school, or association. If this membership is not accepted, the membership fee will be returned in full within thirty days of receipt