



YOM CHI TAEKWON-DO ASSOCIATION®
MEMBERSHIP APPLICATION
PRINT OR TYPE

A Separate form must be filled out for each person applying for membership.

All renewals must be received by the National Membership Director by September 30TH.

Yearly memberships are \$30/member. Additional family members are half price.

Renewals received after September 30th require a \$5 late fee.

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.

Deliver and make checks payable to: Your YOM CHI Instructor.

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.

DATE: _____

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

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

APPLICANT

PARENT/GUARDIAN IF UNDER 18

NAME _____ NAME _____

SIGNATURE _____ SIGNATURE _____

ADDRESS _____ CITY _____

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

SCHOOL _____ INSTRUCTOR _____

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 _____