

INDIAN TAEKWONDO UNION



Registration No. : 41731700839 & Income Tax Department Govt. of India P. A/C No.: AABT14787K

An ISO Certified Taekwondo Organization 9001:2015 No. QMS/07189/0718

KUKKIWON 2019 Top Ranked Taekwondo Organization

MEMBER & PROMOTED BY

KUKKIWON-WORLD TAEKWONDO HEADQUATER (SOUTH KOREA)

Head Office : HH-18, 1st Floor, Civil Township, Rourkela - 769004, Odisha

E-mail ID- indiantaekwondounion@gmail.com, Web : www.taekwondounion.com / Contact – 9583921122 / 9438849523



ATHLETE REGISTRATION FORM

(Please fill in Block Letters only)

Name of Applicant.....

Father's / Guardian's Name.....

Date of Birth..... Gender (M/F) :

Present Address :Post

District..... State Pin

Contact No. WhatsApp No.

Full Name of Association/Academy/Club

QualificationOccupation Belt.....

RULES & REGULATIONS

- I the under signed, Solemnly declare that the particular filed in by me are correct and I declare that I will not misuse the art of TAEKWONDO on PROVOCATIONS (Except for my self defense) and Import Taekwondo training to any one without prior written permission of the Director/Chief Coach.
- I agree/promise to abide by the discipline, direction, terms & Conditions/Rules & Regulations of the TAEKWONDO NATIONAL/STATE ASSOCIATION /ACADEMY/CLUB. Failing which (In case of violation) I will be liable for expulsion without assigning any reason/Intimation whatsoever.
- In case of Injuries/accidents sustained by me during the training / grading / demonstration / competition Period, I will not hold ASSOCIATION /ACADEMY/CLUB OR ITS INSTRUCTIONS/COACHES OR Staff wholly or partially responsible in anyway.
- I will always respect, obey and follow the instructions of my instructor & seniors.
- I will not take part in the activities organized by other organizations/clubs of similar nature, anywhere, without permission.
- I will pay my training fee and other charges well in time.
- In default, all my TAEKWONDO QUALIFICATIONS AWARDS shall IPSO-FACTO become cancelled as annulled and the TAEKWONDO ASSOCIATION/ACADEMY/CLUB shall be at liability to get its decision executed.

Attach
Photograph
of Applicant

Signature of Parent/Guardian

Date: _____

Signature of Athlete

RECOMMENDER

Name & Signature of President/Secretary
State Taekwondo Union

Name & Signature
Head of Club-In-charge