



# Irish Taekwondo Union



## Licence/Membership Application Form 2012

Please complete in BLOCK CAPITAL

Name.....

Address.....

.....

Home Telephone ..... Mobile.....

Parent/Guardian's Email.....

Date of Birth ...../...../..... Age.....

Grade..... Male/Female.....

Membership Number (in licence book) .....

Have you any Special Needs, Disability, Injuries/Weakness or Illness? YES..... NO.....

Please supply summary, but inform your instructor of all details if there is medication required in regarding to Allergies/Diabetics

etc.....

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WTF TAEKWONDO IS A FULL CONTACT SPORT AND THERE IS A RISK OF INJURY

I acknowledge that I have been informed of the nature and potential risks of practising Taekwondo. I apply for membership to the ITU and agree to comply with the rules and regulations of the board.

Signed..... Date...../...../2012

To be completed by the parent or guardian for all applicants under 18 years of age:

I acknowledge that I have been informed of the nature and potential risks of practising Taekwondo. I agree to my son/daughter applying for membership to the ITU.

Signed..... Date...../...../2012

Club Name: Ilyo Taekwondo Club

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Instructors Name: Paul Sheridan.....

Instructors Contact No.: 0860377587.....

ITU Licence & Insurance Fee: 20.00 Euro

Signed:.....Paul Sheridan Chief Instructor.....

For official use only

Number.....

Expires ...../...../.....