



# Club Application

- Club representative and Head Instructor must complete a background check online through [www.usa-taekwondo.us](http://www.usa-taekwondo.us) before application will be processed
- Allow 4-6 weeks for processing. Clubs can register instantly at [www.usa-taekwondo.us](http://www.usa-taekwondo.us)

## Club Information

New Member Renewal Club Number Club Name Club Representative Member ID Head Instructor Member ID Club Representative Name Head Instructor Name  Club Representative is same as Head InstructorPhysical Club Address City State Zip Code  Physical Address is the same as mailing AddressMailing Club Address City State Zip Code Phone Fax E-mail Website  I would like to receive updates from USA Taekwondo via E-mail I do NOT want to receive updates from USA Taekwondo via E-mail I would like additional liability and sport accident coverage insurance – Free with 35 or more club members registered with USA Taekwondo

\_\_\_\_\_(Name of Club) hereby agrees to abide by USA Taekwondo, Articles of Incorporation, Bylaws, and Code of Operations. Additionally, to respect, abide by and to enforce all decisions of the Corporation and to correctly identify itself in all advertising with respect to titles, affiliations, etc. I understand that failure to do so may result in an imposed penalty. No reproductions of the titles, word (s) or logos of USA Taekwondo or the United States Olympic Committee are permitted without the special written consent of the appropriate organization. Misuse of the names and symbols can be a violation of public law and USA Taekwondo bylaws.

The above mentioned club hereby submits this application for Club Membership with USA Taekwondo. Enclosed is one hundred and thirty- five dollars (\$135.00) for the annual dues for the 2015 membership year. I understand there must be 35 athlete/coach/referee members registered with my club in order to receive the free liability insurance through USA Taekwondo. I understand that the \$135.00 membership fee is nonrefundable and nontransferable.

Signature of Club Owner (Club Representative) \_\_\_\_\_ Date: \_\_\_\_\_

## Payment Information

 Money Order/ Cashier's Check  Visa  Mastercard  Discover

 \$135 - Club Fee I would like to help USA Taekwondo with a donation of:  \$5  \$20  \$35  Other

 Total \$  Card Number 

 Expiration Date:  3 Digit Security Code (On back of card):  Billing Zip Code: 

 Card Holder Signature  Date 

 Card Holder Name Printed 

\*USA Taekwondo Cannot Accept Personal or Business Checks

