		AL TANG SOO D		HQ USE ONLY FEDERATIO
Name				
Address		City	State	_
Zip Code	e Telephone		Date Of Birth	
Check if new address	GUP	APPLICATION	Gup Membership	o \$30.00
School Name				
School Address				
Instructor's Name				
Date Studies Began				
	DAN	APPLICATIO	V Dan Membership	\$125.00
School Name				
School Address				
Instructor's Name	& Rank			
Current Rank &	Dan #			
Who Tested you for 1	st Dan ?	? Date Of 1st Dan		
Previous Experience	/ Style			
Previous Instructor's	Name	I	Previous Instructor's Ra	ink
Previous Instructor's	Address			
Are you Currently Ac	ctive ?	Where?		
Are you Currently Te	eaching ?	Where ?		

I understand that upon my acceptance in the International Tang Soo Do Federation *TM*, I will do my best to bring honor to the art of Tang Soo Do, the Federation and Myself.

Student Signiture	— Date	
Parent's Signiture if under 18 years		
Method of Payment: Cash Check M/C or Visa Credit Card #	Send this form and fee to:	
Expiration Date Security Code	International Tang Soo Do Federation TM 3955 Monroeville Bvld. Monroeville Pa. 15146 Attn: Membership Committee For Information Contact I. T. F. HQ: Ph: 412-373-8666 Fax 412-245-1617 Or E-mail: info@itftangsoodo.com	
PLEASE READ! This Membership can be revoked at any time for Actions or behaviors that are deemed by the membership com- mittee as conduct unbecoming a member of the International Tang		
Soo Do Federation. <i>TM</i> All members are expected to recognize that their membership in the International Tang Soo Do Federation <i>TM</i> carries with it the responsibility to demonstrate a high standard of moral integrity and		
outstanding character.	Page 12	