

# UNITED STATES INTERNATIONAL TAEKWON-DO FEDERATION



## NATIONAL HEADQUARTERS

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## MEMBERSHIP APPLICATION

Student Name

Address

City

State / Providence / Region

Postal / Zipcode

Country

Date of Birth

Age

Gender

Home Phone

Mobile Phone

Email Address

Current Rank

Black Belt Cert #

Black Belt Status Card #

Instructor

Instructor's Rank

Is your instructor an ITF Certified Instructor?

School

Do you practice ITF patterns?

Completed forms may be emailed to  
[rw\\_usitf@sbcglobal.net](mailto:rw_usitf@sbcglobal.net)

or mailed to the address at the top of this form.