



USA Taekwondo Family Membership Application



MEMBERSHIP INFORMATION

Family Address City State Zip Code

Daytime Phone Evening Phone Cell Phone Fax Referred By

Email Address

TAX DEDUCTIBLE DONATION

\$5 \$15 \$25 Other \$

CLUB INFORMATION

Club Name USAT Club # Club Instructor

Club Address City State Zip Code

Club Email Address

MAILING INFORMATION

I would like to receive USAT newsletters, information and discount information sent via e-mail
 I do **NOT** want to receive USAT newsletters, information and discount information sent via e-mail

Family Member #1 Information

Complete Name

Birthdate (MM-DD-YYYY) Gender (Circle One) Male Female Membership #

Check Membership Type Applying For:

Athlete Member
**needed to compete in any USAT sanctioned event

Coach Member
**needed to coach in any USAT sanctioned event

Referee Member
** must provide USAT Referee Certification Number
If you currently do not have a Referee Certification and obtain one during the year, you may add the membership at no additional charge by calling the USAT Office

Voting Affiliation Please Circle One
ATHLETE COACH REFEREE

Family Member #2 Information

Complete Name

Birthdate (MM-DD-YYYY) Gender (Circle One) Male Female Membership #

Check Membership Type Applying For:

Athlete Member
**needed to compete in any USAT sanctioned event

Coach Member
**needed to coach in any USAT sanctioned event

Referee Member
** must provide USAT Referee Certification Number
If you currently do not have a Referee Certification and obtain one during the year, you may add the membership at no additional charge by calling the USAT Office

Voting Affiliation Please Circle One
ATHLETE COACH REFEREE

Family Member #3 Information

Complete Name

Birthdate (MM-DD-YYYY) Gender (Circle One) Male Female Membership #

Check Membership Type Applying For:

Athlete Member
**needed to compete in any USAT sanctioned event

Coach Member
**needed to coach in any USAT sanctioned event

Referee Member
** must provide USAT Referee Certification Number
If you currently do not have a Referee Certification and obtain one during the year, you may add the membership at no additional charge by calling the USAT Office

Voting Affiliation Please Circle One
ATHLETE COACH REFEREE

Family Member #4 Information

Complete Name

Birthdate (MM-DD-YYYY) Gender (Circle One) Male Female Membership #

Check Membership Type Applying For:

Athlete Member
**needed to compete in any USAT sanctioned event

Coach Member
**needed to coach in any USAT sanctioned event

Referee Member
** must provide USAT Referee Certification Number
If you currently do not have a Referee Certification and obtain one during the year, you may add the membership at no additional charge by calling the USAT Office

Voting Affiliation Please Circle One
ATHLETE COACH REFEREE

Applications received without signatures or both pages will NOT be processed.
Membership is valid for one year from the date of receipt. Please allow 4-6 weeks for processing



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MEMBERSHIP APPLICATION AGREEMENT, WAIVER & RELEASE OF LIABILITY, ASSUMPTION OR RISK, & PARENTAL CONSENT (WHEN APPLICABLE), INDEMNITY AGREEMENT, & CODE OF CONDUCT:

As a condition of my/the minor's membership in USA Taekwondo, Inc., I agree to abide by the Bylaws, Articles of Incorporation, and all rules imposed by USA Taekwondo, Inc., including, without limitation, the requirement to sign an agreement in the form approved by USA Taekwondo, Inc. limiting the use of membership lists in the event I ever request to inspect the membership list of USA Taekwondo, Inc. I understand the nature of Taekwondo Activities and acknowledge my/the minor's experience and capabilities and believe I/the minor am/is qualified to participate in such Activity. I further acknowledge that I am aware that the Activity will be conducted in facilities open to the public during the Activity. I further agree and warrant that if, at any time, I believe conditions to be unsafe, I/or the minor will immediately discontinue further participation in the Activity. I/THE MINOR FULLY UNDERSTAND that: (a) Taekwondo Activities involve risks and dangers of serious bodily injury, including PERMANENT DISABILITY, PARALYSIS AND DEATH ("Risks"); (b) these Risks and dangers may be caused by my own actions, or inactions, the actions or inactions of others participating in the Activity, the condition in which the Activity takes place or the NEGLIGENCE of the "releasees" named below; (c) there may be other risks and social and economic losses either not known to me or not readily foreseeable at this time; and I/THE MINOR fully accept and assume all such risks and all responsibility for losses, costs, and damages incurred as a result of my participation in the Activity. I/THE MINOR hereby release, discharge, covenant not to sue, and agree to hold harmless USA Taekwondo, any school and/or club where the Activity may take place, or has a vested interest in the Activity, their respective administrators, directors, agents, officers, volunteers, and employees, other participants, any sponsors, advertisers, and if applicable, owners and lessors of premises on which the Activity takes place (each considered one of the "Releasees" herein) from all liability, claims, demands, losses, or damages on account caused or alleged to be caused in whole or in part by the negligence of the "Releasees" or otherwise, including negligent rescue operations and further agree that if, despite this release, I, or anyone on my/the minor's or anyone on my/the minor's behalf makes a claim against any of the Releasees named above, I will indemnify, save and hold harmless each of the releasees from any litigation expenses, attorney fees, loss liability, damage or cost that may incur as the result of any such claim. I have read this agreement, fully understand its terms, understand that I/the minor have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by the law and agree that if any portion of this agreement is held to be invalid, that the balance, notwithstanding, shall continue in full force and effect.

The following outline is the Code of Conduct for USA Taekwondo (USAT). The Code is for all athletes, coaches, tournament committee, international referees and staff members to fully abide by when participating in any and all USA Taekwondo sanctioned event(s). Failure to comply with the following guidelines can result in the removal from an event, dismissal from future USAT sanctioned events, and/or the complete suspension from participation as a competitor, coach or staff member in future USAT sanctioned events.

One will act in a manner consistent with the spirit of fair play and responsible conduct.

One will acknowledge, respect and adhere to the authority of USA Taekwondo appointed event staff and tournament staff if necessary.

One will fully comply with USA Taekwondo (USAT) and the World Taekwondo Federation (WTF) uniform requirements.

One will maintain an appropriate level of fitness to promote optimal athletic performance.

One will refrain from the excessive use of performance-limiting drugs, including, but not limited to, tobacco and alcohol.

One will refrain from using any substance on the Olympic Movement Anti-Doping Code, as enforced by USADA.

One will abide by the policies and rules established by USAT, the USOC and the World Taekwondo Federation.

One will respect others, including coaches, competitors, officials, and spectators.

One will not engage in, nor tolerate, any form of verbal, physical or sexual abuse.

One will respect the property of others.

One will refrain from illegal or inappropriate behavior that would deter from a positive image of oneself and USA Taekwondo.

One will maintain a positive attitude and act in a way that will bring honor to oneself, the staff, the sport of Taekwondo, USA Taekwondo and the United States of America.

One will remember that I am an ambassador of USA Taekwondo, my country and the Olympic movement.

USA Taekwondo recognizes that this Code does not establish a comprehensive set of rules that prescribes every aspect of appropriate behavior.

PRINT - NAME OF MEMBER _____	SIGNATURE OF MEMBER (OR PARENT/LEGAL GUARDIAN) _____	DATE _____
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\$90 FOR 3 MEMBERS \$115 FOR 4 MEMBERS (ADD. CHARGE OF \$25 FOR EACH MEMBER AFTER 4 PEOPLE)

<input type="checkbox"/> Money Order/Cashiers Check	<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard	<input type="checkbox"/> Discover	Total \$	\$ _____
Credit Card # _____	Signature of Cardholder _____	Zip Code _____			
Print Name of Cardholder _____	Security Code (located back of card) _____	Exp Date _____	Date _____		

****Please note that personal checks are not accepted and will be returned with application****