
Application for USTW Individual Membership



United States Taekwondo Won, Inc.

A Non-Profit Organization Promoting Taekwondo in the United States of America

3501 MacCoreckle Ave. SE Suite 127, Charleston, WV 25304-1419

Phone: (304) 539-3044

Web: www.ustw.org

Full Name: _____ M / F

Address: _____ Apt No.: _____

City: _____ State: _____ Zip Code: _____

Date of Birth: _____

Taekwondo Rank: _____ Gup / Dan

Phone: _____ Fax: _____ E-mail: _____

School/Club Name: _____ Phone: _____

School/Club Address: _____ Suite: _____

City: _____ State: _____ Zip Code: _____

Head Instructor: _____ State Association: _____

Membership Fee: \$30.00 for one (1) year \$55.00 for two (2) years

\$ _____ Voluntary Tax-Deductible Donation

Term of Membership: Membership runs for 12 months from the date of application.

Send To: Please submit check or money order payable to the
United States Taekwondo Won at the address shown above.

The undersigned hereby agrees to abide by the Articles of Incorporation, Bylaws, and Rules and Regulations of the United States Taekwondo Won, Inc.

Existing USTW Membership? Y / N Year(s) of Membership: _____

Signature of Applicant: _____ Date: _____

Signature of Parent/Guardian (if Minor): _____ Date: _____
