

INTERNATIONAL TAEKWON-DO FEDERATION[®] Certificate Applications List

	Surname	Forename	Nationality	Date of Grading DAY/MONTH/YEAR	New Degree
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
				Date of Seminar DAY/MONTH/YEAR	INSTRUCTOR/UMPIRE

Certificate will be returned to the registered INO / ISD address:

Name	Organisation	INO Ref:
Address		
Address		
Telephone	Email	

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