

International Chang-Hon Taekwon-Do FederationApplication for Promotion - 4th Dan and up

PLEASE NOTE: FORM MUST BE FILLED OUT ELECTRONICALLY AND SUBMITTED BY EMAIL ONLY (UPPERCASE LETTERS)

ICTF-PRO4-19-1

		ADMINISTRATIVE USE
Date Received:	Date Processed:	Membership #:
INSTRUCTIONS		
	lated application to your head instructor als	and with the \$50 review for Yeurana responsible to
		ong with the \$50 review fee. You are responsible to d regulations of the ICTF HQ .The application must
be submitted 6 months to 1 year bef		0 11
		in@ictf-admin.com .The committee will email back
to set up the official test date and to	appoint the examiner to administer the tes	t.
☐ Mr. ☐ Mrs. ☐ Miss ☐ Ms.		
First and Last Name		
Address		City
Province / State	Country	Postal Code
Phone	E-mail	
		PLEASE SPELL OUT MONTH
Occupation	Nationality	Date of Birth (day/month/year)
Head Instructor		
neau mstructor		
School Name	City, Province/State	Country
		•
		PLEASE SPELL OUT MONTH
Degree Applied For	Last Degree and Number	Last Grading Date
Last Examiner Name	Examiner Rank	Organization
<u> </u>		
Payment: Total Am	ount: \$50.00 ICTF HQ should be made via e-transfer, usi	ng the following email address:
admin@ictf-admin.d		ing the following cirtain address.
For bank to bank tr	ansfer please contact the head office at: mas	tercariati@gmail.com
Signature:		