



ORIGINAL TAEKWON-DO FEDERATION OF AMERICA  
**INDIVIDUAL STUDENT APPLICATION**

**Individual Membership Information**

Make checks payable to: O.T.F.A.  
Mail Application & Payment to: O.T.F.A.  
1016 11th Street  
Hood River, OR 97031

**Membership Package**

Individual Membership \$50  
 Family Discount \$25

*(Please check preferred box)*

**Personal Information**

Date: \_\_\_\_\_  
First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zipcode: \_\_\_\_\_ Phone: \_\_\_\_\_  
Rank: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Black Belt No.: \_\_\_\_\_ Promotion Date: \_\_\_\_\_  
Sex (M or F): \_\_\_\_\_ Email: \_\_\_\_\_

**Dojang Information**

Dojang Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zipcode: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_  
Dojang Website: \_\_\_\_\_  
Instructor Name: \_\_\_\_\_ Rank: \_\_\_\_\_

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Black Belts coming from other Associations/Federations must attach a detailed resume of your Taekwon-do experience, photo copies of your most recent rank certification, and one passport size color photograph for your membership card.

**Family Discount: \$50 for first family member / \$25 for each additional family member**

**Forms can be emailed to: [ssaccareccia@otfa-usa.org](mailto:ssaccareccia@otfa-usa.org)**

**Payments can be made by check (mail) or credit card (phone)**