

## **Taekwondo Australia Inc**

## **Coaching Accreditation Scheme Taekwondo Coaching Course**

## **APPLICATION FORM**

Date of Course:		state:	
TA – Membership Number:		_ (Your membership <b>MUST</b> be	e current)
Name: Mr. / Mrs. / Ms / M	ss:		
State:	Level of accreditation being s	ought: <u>1</u>	
Address:	Suburb:		
Post Code:	Email:		
			/ pe 16 years or over)
Rank: Dan / Gu	up (Must hold a Red Belt or H	ligher)	
Name of Head Instructor:			
Club you train with:			
Signature of applicant:Date:			
Parent or guardian authoriz	ation if the applicant is under	the age of 18 years:	
Signature:	Da	te:	
2 weeks prior to any Coachi		e \$200 fee to your State Coacl noney orders are to be made p period	
<ol> <li>Course Application</li> <li>Photocopy of the R</li> <li>Signed Coach's Cod</li> </ol>	Form  urrent personal ID (eg. Drivin ed belt rank or higher e of Ethics Form current Taekwondo Australia otograph	-	tor:
OFFICE USE		Log on Dbase	/ /
Date Received	/ /	Letter Issued	/ /

Coach Education / Officiating Manager PO Box 4056, Kogarah Bay, NSW 2217. ta.ncas@bigpond.com

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Desc:

Fee Enc Approved / Not