Please send this form to the **WTF education department** (fax to +82 2 553 4728 or e-mail to ([registration@wtf.org](mailto:registration@wtf.org)) by no later than **March 27, 2017**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name | **First name Middle name Family name** | | | |
| **Nationality** |  | **Gender** | | **M( ) / F ( )** |
| **Date of Birth** | **(mm / dd / yy)** | **Country of Birth** | |  |
| **Occupation** |  | | | |
| **Kukkiwon Dan Grade** |  | **Date of Issue**  **(mm / dd / yy)** | |  |
| **Kukkiwon Dan**  **Certificate No.** |  | | | |
| **National Referee Certificate No.**  **(for Kyorugi)** |  | **Date of Issue**  **(mm / dd / yy)** | |  |
| **Tel** | **(Home) (Mobile)** | | | |
| **Fax** |  | | | |
| **E-mail** |  | | | |
| **Postal Address** |  | | | |
| **Recommendation by**  Member National Association President | **Name:** | | **Signature:** | |

**I hereby submit my application to attend the:**

**The 94th International Kyorugi Referee Seminar**

**The 32nd International Poomsae Referee Seminar**

**to be conducted by WTF.**

Date:

Signature: