



Illinois Taekwondo State Association

Individual Membership Form

MEMBERSHIP INFORMATION

<input type="checkbox"/> New Member	<input type="checkbox"/> Renewal	ITSA Number	<input type="text"/>
First Name	Middle Name	Last Name	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Address			
<input type="text"/>			
City	State	Zip Code	Referred By
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Daytime Phone	Evening Phone	Cell Phone	Fax #
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Email Address	Gender (Circle One)	Birth date (MM-DD-YYYY)	
<input type="text"/>	Male Female	<input type="text"/>	

CLUB INFORMATION

Club Name	ITSA Club #	Club Instructor	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Club Address	City	State	Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Club Email Address			
<input type="text"/>			

MEMBERSHIP OPTIONS: Please check all that apply

\$16 Annual Fee

☐ \$5 ☐ \$ 15 ☐ \$25 ☐ Other _____

- ☐ Athlete Member (Discounts on ITSA hosted events)
- ☐ Coach Member (Discounts in ITSA coaching seminars)
- ☐ Referee Member (Opportunities to be selected for USAT National Events and events paid by ITSA)

TAX DEDUCIBLE DONATION

PAYMENT OPTIONS

<input type="checkbox"/> Money Order /Cashiers Check	<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard	<input type="checkbox"/> Am Express	<input type="checkbox"/> Discover
Tot Amount	<input type="text"/>	Credit Card	<input type="text"/>	Security Code
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Print Name of Cardholder	Exp Date	Zip Code		
<input type="text"/>	<input type="text"/>	<input type="text"/>		
Signature of Cardholder	<input type="text"/>	Date	<input type="text"/>	

Membership is valid for one year from the date of receipt. Please allow 4 weeks for processing.
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