



# INFINIO TAEKWONDO WORLD

(Affiliated to KUKKIWON- World Taekwondo Headquarters, Korea & WTMA, USA)

8-2-603/M/23, Mithilanagar, Rd. No.10, Banjara Hills, Hyderabad-34, T.S., INDIA



## Student Registration Form

S.NO. \_\_\_\_\_ (Please fill this form in BLOCK LETTERS)

Centre/DOJO Name: \_\_\_\_\_

Name of the Candidate: \_\_\_\_\_

D.O.B.: \_\_\_\_\_

Gender: Male  Female

Father's / 1<sup>st</sup> Guardians' Name \_\_\_\_\_

Phone No.: \_\_\_\_\_ Email: \_\_\_\_\_

Mother's / 2<sup>nd</sup> Guardians' Name: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Email: \_\_\_\_\_

Address: Building Name/Flat No. /House No.: \_\_\_\_\_

Street Name: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Country: \_\_\_\_\_

Nationality: \_\_\_\_\_

Mob. No.: \_\_\_\_\_ Telephone No. (If any): \_\_\_\_\_

Email: \_\_\_\_\_

Present Belt: \_\_\_\_\_

Previous Experience/Achievements in Martial Arts:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The particulars given above are true and correct to the best of my knowledge and I promise to abide by the rules and regulations of the Belt Test and Training mentioned below.

The training will be conducted to each individual at his/her own risk. Though all precautions will be observed to avoid pain, injury or fractures to any part of the body which occurs while undergoing the training, no claims whatsoever shall be made on Individual/Organisation.

Date: \_\_\_\_\_

Place: \_\_\_\_\_

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Parent's/Guardian's Sign  
(In case of minor)

\_\_\_\_\_  
Instructor/Coach's Signature

Attach Photograph  
(UK VISA SIZE)