



COACH Only Seminar Registration Form

1 day classroom

Master Seung's – Argentia (#2 - 2895 Argentia Road, Mississauga, ON L5N 8G6)

October 27, 2012

Name: Date of Birth

Address:

City: Postal Code:

Telephone Numbers: (Home) (Cell)

E-mail:

Black Belt Level: Dan/Poom Kukkiwon #

OTA Club:

Fees:	Seminar Participant
Level Applied	
Seminar Fee Due	\$53.10
HST	6.90
Total Due	\$60.00
Total Paid	
Received by	

Ontario Taekwondo Association: HST Registration Number = 88531 0623

I _____ hereby submit my application to participate in the referee seminar above. I confirm that I have submitted my individual membership to the OTA for the current fiscal period (April 1 – March 31). [if you have not, please submit OTA membership form and payment with this application].

Signature: _____ Date: _____

For office use only:

	Requirements									
Knowledge of hand signals	1	2	3	4	5	6	7	8	9	10
Move in the ring	1	2	3	4	5	6	7	8	9	10
Overall control	1	2	3	4	5	6	7	8	9	10
Positioning	1	2	3	4	5	6	7	8	9	10
Ring Etiquette	1	2	3	4	5	6	7	8	9	10
Corner Judging	1	2	3	4	5	6	7	8	9	10
Interview	1	2	3	4	5	6	7	8	9	10
Comments										

FINAL SCORE:	Practical	Written:	Class Achieved:
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Examiner Signature: _____ Date: _____