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Serial Number



UNIFIED INTERNATIONAL TAEKWON-DO FEDERATION **SINGAPORE**

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APPLICATION FOR CHARTER SCHOOL

SCHOOL NAME: _____

SCHOOL ADDRESS: _____

CHIEF INSTRUCTOR: _____
Mr/Mrs/Miss First Name Last Name Rank

COUNTRY: _____

PHONE: _____
Country Code

EMAIL: _____

WEBSITE: _____

NO. OF BLACK BELTS: _____

NO. OF STUDENTS: _____

Signature

Date