

2024 ITF Taekwon-Do B.C. Cup

REQUIRED INFORMATION FOR REGISTRATION AS A COMPETITOR

First Name: _____

Last Name: _____

Email Address: _____

Birthday DD-MM-YYYY: _____

Weight in kg: _____

Height in cm: _____

Gup (or belt color): _____

Dan (black belt): _____

Gender at Birth: _____

International ID (black belt): _____

SEND photo ID to your
instructor's email: _____