



APPLICATION FORM
FOR
"WHO'S WHO IN COMBAT HAPKIDO
QUARTER CENTURY EDITION"

NAME: _____ D.O.B. _____

ADDRESS: _____

EMAIL: _____ PHONE: _____

COMBAT HAPKIDO BLACK BELT RANK: _____ DAN

NATIONALITY: USA OTHER: _____

NOTE:

TO BE INDUCTED IN THE "WHO'S WHO IN COMBAT HAPKIDO" YOU **MUST** BE A CURRENT MEMBER IN GOOD STANDING OF THE ICHF. FORMER / EXPIRED MEMBERS ARE **NOT** ELIGIBLE.

PLEASE ENCLOSE FEE PAYMENT US\$30 _____

SIGNATURE

DATE