

YANG FAMILY TAI CHI

CENTER/SCHOOL APPLICATION

YANG FAMILY
TAI CHI



1. IDENTIFICATION

First Name		Last Name		PHOTO 2" x 2" (You can attach in to this PDF file)
Gender: M	F	Birthday: MM/DD/YYYY		
Address				
City	State/Province	Zip Code	Country	
Member ID	Rank:	Date:	Current Instructor Status	
Current Rank & Date Obtained				

2. TRAINING, TEACHING AND PROFESSIONAL EXPERIENCE

A. Describe your martial arts training including training in tai chi chuan. (Attach additional pages if necessary)

B. Describe your experience as a teacher of tai chi chuan.



C. Describe your professional training and experience.

3. RECOMMENDATION OF MORAL CHARACTER

(Recommendation of person's moral character from one center director or one teacher or at least three colleagues.)

4. FOR ASSOCIATION USE ONLY

Officer Comments:

Officer Signature: _____

Date: _____

Association President Comments:

President Signature: _____

Date: _____

Note: Submit this Application, along with a \$50 Application Fee to:
YANG FAMILY TAI CHI
Membership Department
P.O. Box 786, Bothell, WA 98041 USA. or Email: members@yangfamilytaichi.com
Applicants will be notified within six months

