



SINGAPORE TAEKWONDO FEDERATION
MEMBERSHIP APPLICATION

Applicant may submit the membership application online via email to sktdf@mail.com or in persons at Singapore Taekwondo Federation (STF) Office, 35 Joo Chiat Place, Singapore 427759 during office hours.

Please refer and read the following documents which are on STF website before proceeding to apply for STF *Full Member/Associate Member:

STF Membership Policy (<https://www.stf.sg/reference-documents/singapore-taekwondo-federation-stf-membership-policy/>)

STF Constitution (<https://www.stf.sg/stf-constitution/stf-constitution-june-2022/>)

*Please tick the application: Full Member Associate Member

Please attach the following supporting documents for the membership application.

1.	Accounting and Corporate Regulatory Authority (ACRA)/Registry of Society (ROS)/Registry of Companies and Businesses (ROCB)
2.	STF 4 th Dan & above
3.	SG-Coach Level 1 or equivalent (e.g. NCAP Level 1 Full Certificate)
4.	Poomsae Coach Level 1
5.	Valid First Aid Certificate
6.	Recommendation written document (letter/email) from current STF Full Member
7.	Approval of Training Ground Permit/Letter
8.	NROC Certificate, if any [Head Coach(es) must be registered with National Registry of Coaches (NROC) by April 2025]

Forms received on _____ [DD/MM/YYYY] [OFFICIAL USE]

Information about Club & Training			
Name of Club			
Address			
Telephone No.		Fax No.	
Date of Formation			
Date of Registration (ACRA/ROS/ROCB)			
UEN No.			
No. of Members			

Training Ground			
Address			
Telephone No.		Fax No	
No. of Training Sessions Per Week			
Training Days			
Training Time			

Recommendation by STF Full Member	
Name of Club	

Information about the Key Office Bearers & Coach		
Name of President		
Address		
Email Address		
Telephone No.	(Mobile)	(Office)
Name of Secretary		
Address		
Email Address		
Telephone No.	(Mobile)	(Office)

Name of Coach			
Address			
Email Address			
Telephone No.	(Mobile)	(Office)	
STF Dan		Date Obtained	
Kukkiwon Dan, if any		Date Obtained	
SG-Coach Level 1/ NCAP Coach Level 1		Date Obtained	
Poomsae Coach Level		Date Obtained	
First Aid Certificate [Date obtained]		Date of Expiry	
NROC Status [Please tick any]	Registered	Not Registered	Date of Expiry, If applicable

Submitted by:	
Name of Club	
Name of Applicant	
Designation	
Date of Application	
Signature	