

Name: _____

Date: _____

Kim's Tae Kwon Do Rank Test

Tae Kwon Do is divided into three equal parts: Mind, Body, and Spirit. The upcoming testing is designed to test your physical ability, or your Body. This short written test is designed to test your Mind. Both your mind and body are important in Tae Kwon Do, and both hold weight to your overall success. To develop your Tae Kwon Do spirit, you must first develop your mind and body.

Red Belt Test

1. What were the three Kingdoms of Ancient Korea?

1. _____

2. _____

3. _____

2. Name your form and give it's meaning.

Form Name: _____

Form Meaning: _____

3. Under which Kingdom did Grand Master Kim's lineage begin?



PROMOTIONAL TESTING APPLICATION

American

Chung Do Kwan Taekwondo Association

DO NOT WRITE IN THIS SPACE
AMT PD _____ DATE _____

TURNED IN CARD
 NO CARD BY _____

<input type="text"/> ACTA #	<input type="text"/> LAST	<input type="text"/> FIRST	<input type="text"/> INIT
<input type="text"/> ADDRESS			
<input type="text"/> CITY	<input type="text"/> STATE	<input type="text"/> ZIP	<input type="text"/> BROWN AND BLACK BELOW
<input type="text"/> EMAIL ADDRESS		<input type="text"/> SIGNATURE OF APPLICANT	
<input type="checkbox"/> CHECK HERE IF NEW ADDRESS	<input type="text"/> DATE OF BIRTH	<input type="text"/> HEIGHT	<input type="text"/> WEIGHT
		<input type="text"/> SIGNATURE OF PARENT IF UNDER 18 YRS. OLD	
MAKE CHECKS PAYABLE TO ACTA MN			

I hereby submit this application for the regularly scheduled Promotional Testing. It is agreed and understood that I will adhere to all the rules and regulations outlined in the bylaws of the American ChungDoKwan TaeKwonDo Association, and of Kim's Academy. I agree to waive claims against any persons, schools, and associations connected with the American ChungDoKwan TaeKwonDo Association for injuries I may sustain and likewise assume full responsibility for all my actions in connection with said testing.

HOW TO FILL IN THIS FORM:

1. Print all the required information, All the information requested must be given or the form will be returned to you.
2. To fill in the information for location, see your immediate instructor. ACTA Number can be found on your ACTA membership card,

PAYMENT:

1. See your immediate instructor for the testing fee.
2. You may pay by check or money order. Do not send cash.
3. Return this form to your immediate instructor

\$5.00 late fee after the Thursday class prior to the Saturday testing.

Please Enter Your Date Of Birth

**ACTA MN Testing Fee Structure
Effective 6/1/2018**

Current Rank	Testing Fee	ACTA Fee
White		\$35
White Yellow	\$75	
Yellow	\$75	
Orange	\$75	
Green	\$75	
Green / Blue	\$75	
Blue	\$75	
Blue / Red	\$95	
Red	\$95	
Red/Brown	\$150	
Brown	\$195	
Brown/Black	\$300	