

International ChoSonDo Federation
ChoSon Kwon Bup – Taekwondo – Hapkido – Oriental Medicine
Law Enforcement Defensive Tactics
7252 Valley Avenue
Philadelphia, PA 19128
Tel: (215) 483-5057

SCHOOL CHARTER APPLICATION

Charter No.: _____
(for office use only)

Charter Fee: \$150.00 (One Time Fee)

Name of School: _____

Address of School: _____

(City)

(State)

(Zip)

Phone Number: _____ E-Mail Address: _____ Webpage: _____

Name of School Owner/Chief Instructor: _____

Total Student Enrollment: _____ Number of Branch Schools: _____

CHARTER AGREEMENT

I, _____, owner /Chief instructor of the above school(s) agree to follow the training curriculums of ChoSon Kwon Bup, Taekwondo, Hapkido, Oriental Medicine, and Law Enforcement Defensive Tactics, evaluation and examination requirements, and the philosophies of said arts without modifying or changing any aspect thereof.

I agree to use the International ChoSonDo Federation's logo/emblem for use on letterheads and for advertising purposes. I agree not to abuse the International ChoSonDo Federation's logo/emblem or the privileges afforded by this charter.

Date: ____/____/____ Signature: _____