

# DISTRICT TAEKWONDO ASSOCIATION, DEHRADUN (Regd.)



Affiliated to : Uttaranchal Taekwondo  
: Taekwondo Federation of India  
: World Taekwondo  
Recog. by : Indian Olympic Association  
: Government of India



## UNDERTAKING FORM FOR OTHER MIGRATED STUDENTS

Name (In Capital Letters)				Paste photograph here
Father's name				
Mother's name				
Date of Birth		Gender		
Blood Group		Mobile no.	e-mail id	
Address				
				Pin code
Name of previous Branch			Name of joining Branch	
Name of previous association			Name of previous coach	

### DECLARATION

I, the undersigned do hereby solemnly affirm, declare and confirm for myself, my heirs, executors & administrators that I indemnify the Promoters/ Organisers / Sponsors & its Members, Officials, Participants etc., holding myself personally responsible for all damages, injuries of accidents, claims, demands etc., waiving all prerogative rights, whatsoever related to the above set training. I have been also aware about the risks involved in the game and sending my ward willingly. I will not claim any type of compensation towards District Taekwondo Association. In case of any injury or casualty I will be solely responsible and not lodge any case against District Taekwondo Association, District association officials, coach or administration. I am willingly joining this association and I will be abide to follow all the rules regulations of this association. I will not play any championship or tournament conducted by other associations. If I will found doing so I will be liable to be expelled from the association immediately. I will not take [part in anti-association activities and will be faithful to the association.

Signature of Parent / Guardian	Signature of Coach	Signature of Student