



CHAMPION SPORTSPLEX

BELT TEST REGISTRATION FORM

Student's Name _____ Age _____

School Grade _____ Current Belt: _____

Testing for _____ (Belt Color)

Qualifications for Testing (minor students – Parents please comment)

1. Students attitude and behavior at home:

2. Student's attitude and behavior at school:

The instructor will evaluate the student as far as their attitude, attendance during classes, and TKD skills as they relate to their age and belt level.

This form must be completed, signed and handed in to the instructor prior to testing. A photocopy of a recent report card and \$55 testing fee should be attached. Checks should be made payable to Champion Sportsplex.

Parent/Guardian's signature endorses the student's qualification to test.

Parent's Signature _____ Date _____

Student's Signature _____ Date _____