



**OHTC MARTIAL ARTS ASSOCIATION**  
**Chun Seung Jong Hap Moo Sool**

**REGISTRATION FORM FOR PROMOTIONAL EXAMINATION**

I recognize that belts are awarded only when specific standards of performance can be met by the student during testing. In the event that I may not perform to the satisfaction of the testing officials, promotion may be delayed until further progress has been demonstrated after a designated period of further practice. If I do not achieve the desired rank, I may test again for that rank at the next testing session. I recognize that promotion standards are uniform and that each belt reflects a specific level of competence. If he or she is nominated outstanding in the promotion test, the student can double test on the next upcoming test to move up two ranks at the same time. Whoever has the ability may take the advantage to double promote.

I understand the nature of martial arts contains some combative activities and accidents may occur that may cause injury. Therefore, I, OHTC Martial Arts Association student, do hereby for myself, my heirs, executors, administrators and assigns, waive, release and forever discharge any and all rights and claims whatsoever for damages which I may have, or shall hereinafter occur to me, against my martial arts school, master, instructor or to other members, for any and all damages which may be sustained and suffered by me in connection with my association or entry in any practice, class, performing in promotion test, or which may arise out of my travelling to, participating in or returning from such endeavour.

**Applicant's Information:**

Name: \_\_\_\_\_ Sex: Male [ ] Female [ ] Date of Birth: \_\_\_\_\_

Martial Art: \_\_\_\_\_ Present Rank: \_\_\_\_\_ Applied Rank: \_\_\_\_\_

Date: \_\_\_\_\_ Signature (Applicant): \_\_\_\_\_

Date: \_\_\_\_\_ Signature (Guardian): \_\_\_\_\_

**STUDENTS DO NOT WRITE BELOW THIS LINE**

Chapter Number (If Applicable): \_\_\_\_\_ Root Code (If Applicable): \_\_\_\_\_

Test Conducted By: \_\_\_\_\_ Root Code ( ) in OHTC Martial Arts Association

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Master Degree: \_\_\_\_\_ Degree Black Belt

Test Date: \_\_\_\_\_ Score: \_\_\_\_\_

Remarks: \_\_\_\_\_

Retest Date: \_\_\_\_\_ Score: \_\_\_\_\_ Retest By Date: \_\_\_\_\_

Remarks: \_\_\_\_\_

Signature: \_\_\_\_\_ Record No: \_\_\_\_\_ Issue Date: \_\_\_\_\_ Issue No: \_\_\_\_\_



傳承 綜合 武術 協會  
전승 종합 무술 협회

“Chun Seung Jong Hap Moo Sool”

**Certificate of Martial Arts**

Grade [ ] Degree [ ]

**Martial Arts Information**

Instructor's Chapter Number:  or Master's Root Number

Student's Name: \_\_\_\_\_ Sex: (Check One) Male [ ] Female [ ]

Martial Arts: (Check One) Tae Kwon Do [ ] Hap Ki Do [ ] Moo Sa Sool [ ] Tai Chi Chuan [ ] Shaolin Chuan [ ]

Present Rank: \_\_\_\_\_ Applied Rank: \_\_\_\_\_

**Score Report**

**Requirements:** (5) Categories, (20) points each.

Total 71 or Above = Pass, Total 91 or Above = Outstanding

Categories	Standard Score	Extra Score	Deduction Score	Subtotal Score	Remarks:
1.					
2.					
3.					
4.					
5.					
<b>TOTAL SCORE:</b>					

**\*\* If score total is under 71, then it requires a retest within 2 weeks.**

<b>Retest Date:</b>	<input type="text"/>	<b>Retest Score:</b>	<input type="text"/>
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**This is to certify that the above person has completed the scheduled promotion test conducted by the OHTC Martial Arts Association.**

Issue Date: \_\_\_\_\_ Test Result: (Check One) PASS [ ] RETEST [ ]

Test Conducted By: \_\_\_\_\_ Root Code ( ) in OHTC Martial Arts Association

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Master Degree: \_\_\_\_\_ Degree Black Belt

Signature: \_\_\_\_\_

Retest Conducted By: \_\_\_\_\_ Root Code ( ) in OHTC Martial Arts Association

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Master Degree: \_\_\_\_\_ Degree Black Belt

Signature: \_\_\_\_\_