



# International Tien Shan Pai Association



○德○智○謙○武○

●VIRTUE●WISDOM●HUMILITY●MARTIAL ARTS●

## Membership Application Form

**Personal Information:** (please print all information below)

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Date of Birth (mm/dd/yy): \_\_\_\_\_ Age: \_\_\_\_\_ M / F (circle one)

Telephone: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_

Years of experience: \_\_\_\_\_ (Please include a brief resume of yourself on the back of this form)

Rank: \_\_\_\_\_ Favorite Form: \_\_\_\_\_

**School Information:**

School Name: \_\_\_\_\_

Shih-Fu: \_\_\_\_\_

Telephone: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_

**Type of Membership:**

(Please check the desired type of membership)

<u>Type</u>	<u>Fee</u>
_____ Individual membership	(\$15/year)
_____ School membership	(\$100/4years)
_____ Lifetime individual membership**	(\$150)
_____ Lifetime school membership***	(\$300)

\*All members will receive a discount on all tsp seminars  
 \*\*Lifetime members receive a special tsp certificate  
 \*\*\*Lifetime school memberships will have their school listed on the tsp website as well as a special tsp certificate

Mailing Address: <i>International Tien Shan Pai Association</i> P.O. Box 20269 Baltimore, MD 21284-0269 phone: (443) 394-9222 / fax: (443) 394-9202	
(office use only)	
Membership number:	_____
Date received:	_____
Expiration date:	_____
Processed by:	_____