

6th National High School Taekwondo Championships April 20-21, 2019



FORM B: CERTIFICATION OF HIGH SCHOOL ENROLLMENT STATUS

THIS FORM MUST BE CERTIFIED WITH AN OFFICIAL SEAL AND SIGNATURE BY AN ADMINISTRATOR AT YOUR HIGH SCHOOL **ON OR AFTER February 10, 2019.**

| COMPETITOR NAME: | DOB: | |
|---|---|-------------|
| PHONE NUMBER: | EMAIL: | |
| COMPETITOR BELT COLOR:_BLACK BELTS O | ONLY (no color belt competition) | |
| COMPETITOR DIVISION (POOMSAE, SPARRIN | G OR BOTH): | |
| HIGH SCHOOL NAME AND LOCATION: | | |
| YEAR IN SCHOOL: freshman / sophomore / junior | / senior / graduated STUDENT ID # | |
| I,, authoriz registered student with the school official listed below | e NCTA officials to confirm my status as an officiallw. | ly |
| | (your signature) | (date) |
| The official school seal/stamp and signature (below) | verifies that the above-named competitor is (please | check one): |
| ☐ currently registered as a full-time student for SPF | RING Term 2019 at the above high school | |
| OR | | |
| ☐ home-schooled | | |
| OR | | |
| ☐ graduated from the above-named high school dur | ing the current academic year | |
| Signature and Title of high school administration off | icial | |
| Phone number of high school administration official | | |
| Date (must be on or after February 10, 2019) | | |
| School Seal/Stamp: | Postmark by April 5, 2019. Mail to: NCTA 2019 17 Congress Ave Sioux City, IA 51104-4053 | |

Please DO NOT use signature required.