



**Miejski Klub Sportowy  
„LEWART” AGS**

**21 – 100 Lubartów, ul Krzywe Koło 34a, tel. +48603133228**

Bank account: 52 2030 0045 1110 0000 0392 0200 BGŻ BNP Paribas S.A. o/Lubartów

**XXI Central Taekwon-Do Winter Camp  
SZCZYRK, 20-26 January 2023**

**APPLICATION FORM**

1. First name and family name .....

1. Date of birth.....

2. Address .....  
(postcode) (town) (province)  
.....  
(street) (house no) (flat no)

4. Phone number and e-mail address: .....

5. Name of original Taekwon-Do school .....

6. Current Taekwon-Do grade/degree .....

7. Confirmation of attendance at the ski slope  Yes  No

8. Level of advance in skiing/snowboarding  beginner  intermediate  advance

9. T-shirt size:.....

I wish to enrol for Central Taekwon-do Winter Camp and will obey its regulations.

I hereby certify to have a medical and accident insurance no .....

.....  
(signature - full name)

*Please send the application form before 09<sup>th</sup> of January 2023  
to the email address: [itfjurekjedut@wp.pl](mailto:itfjurekjedut@wp.pl)*