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teenbadmintonclub1

TEEN BADMINTON CLUB

Welcome to TBC's Registration Sheet for all players

(To be Filled-in by each family once per school year)

Select Your
Location(s):

☐

BAIE d'URFÉ @AVH GERMAN SCHOOL

☐

POINTE-CLAIRE @ST. THOMAS HIGH SCHOOL

☐

NDG @MARYMOUNT ACADEMY

☐

OTHER: _____

How did you hear about us:

☐

I'm a returning player

☐

Internet

☐

Referral: _____

City (Borough) of residence: _____

(For statistical purposes)

www.TeenBadmintonClub.ca



ALL YOUTH PROGRAMS (Badminton, Chess, Futsal, etc.)

1.

PLAYER NAME

GRADE

SCHOOL

2.

PLAYER NAME

GRADE

SCHOOL

3.

PLAYER NAME

GRADE

SCHOOL

ADULT / PARENT / GUARDIAN NAME : _____

ADULT / PARENT / GUARDIAN EMAIL : _____

CONTACT/EMERGENCY PHONE NUMBER : () —

ADULT CLUB

(Badminton / Pickleball)

NAMES:

1.

2.

3.

4.

5.

6.

I Hereby consent to the participation of the above names in the Teen Badminton Club, Junior Birdies! Family/Adult Club and all related activities. I will not hold this Club or its personnel liable for any related injuries, losses or damages that are part of our regular activities. I have included any pertinent medical history/information on the back of this form. The adult/legal guardian/parent Name: _____ Date: _____ Signature: _____

ADMINISTRATIVE SECTION:

☐

FALL SEASON

☐

WINTER SEASON

☐

SPRING SEASON