

JUNIOR AND ADULT CLASS REGISTRATION FORM

REGISTRATION INFORMATION

Registration is first come, first served. Email is the best opportunity for getting into the program of your choice!

Call our office if you do not receive a confirmation email within 7 days of mailing/faxing your request.

An assessment is required for all levels except for Bronze and Adult Beginners.

All classes are based on a maximum of 20 participants and minimum of 4.

Payment must be received in full for all sessions prior to first lesson. Shuttles are provided by SBC.

Please note there is no makeup for classes missed.

PHONE-IN: Please call (425) 889-FMAII: MAIL IN: Send form and payment FAX IN: Fax form to (425) WALK IN: Office Hours: coach@seattlebadminton.com 5958 to reserve your spot during to: 10858, 117th Pl NE, Kirkland, 484-0015 Mon-Fri: 6pm - 10pm office hour. WA 98033 10am - 7pm 10am - 6pm Sun: ■ Member **New Student** Student Name: Gender (M/F): ■ Non-Member ☐ Yes ☐ No Address (new student only): **Emergency Contact (new student only):** Primary Phone #: Name /Phone #: **Email address:** Birth month and year (MM/YYYY): **Class Name Lesson Day of the Week** Fee Note: Sub Total: □ 5% Early Discount (%): □ 8% 3x's a week □ 15% 4x's a week □ 20% 5x's a week \$ Total: Hold Harmless Agreement Indemnification. In consideration for myself and/or my child being allowed to participate in the subject activity, for myself, my heirs and personal representatives, to the extent allowed by law, I hereby waive and release all claims for damages I or my child now or Method of Payment may hereafter have against Seattle Badminton Club and their agents for any injuries and damages suffered in connection with my or my child's participation. I futher agree to defend, indemnify and hold harmless Seattle Badminton Club and their agents from all Credit Card claims for injury or death, or for loss or damage to property, filed by anyone against Seattle Badminton and their agents which arises out of my or my child's participation, except for injury or damage caused by the sole negligence of Seattle Badminton Club and their ■ Check agents. I, the undersigned participant and/or parent or guardian of the minor participant, give my permission to have photos/video tapes taken, without recompense, during activities and used for publicity purposes. Cash Date: Signature: Parent ■ Guardian Signature of **Participant**