

## Tiger Badminton Adults Training Program Registration Form

**For beginners:**

**Every Sunday: 1pm-2:30pm and 3pm-4:30pm.**

**Student Name:** \_\_\_\_\_

**Contact Number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Student's Age:** \_\_\_\_\_ **Gender:** \_\_\_\_\_

**Emergency Contact Name:** \_\_\_\_\_

**Emergency Contact Number:** \_\_\_\_\_

**Medical Conditions/Allergies:** \_\_\_\_\_  
(If any, please specify)

**Training Preferences:**

**Preferred Training Days:**

☐ Tuesday. ☐ Thursday. ☐ Sunday.

**Preferred Training Time:** \_\_\_\_\_

**Payment Information:**

**\$450/10 sessions.**

**Payment Method:**

**Method:**

☐ Cash. ☐ Credit Card. ☐ Bank Transfer. ☐ Zelle.

**\*\*Agreement:\*\***

I hereby acknowledge that I have read and understood the Adults Badminton Training Program details and agree to abide by the terms and conditions mentioned in the brochure.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Please submit this registration form along with the payment to secure your spot in the program.**

**For inquiries, contact us at: 646-577-3351 or Email: [office@tigerbadminton.com](mailto:office@tigerbadminton.com)**