

Tiger Badminton Youth Training Program Registration Form

For beginners:

- Every Tuesday & Thursday: 5pm-6:30pm.

For intermediates:

- Every Sunday: 5pm-6:30pm.

Parent/Guardian Name: _____

Contact Number: _____

Email Address: _____

Student's Name: _____

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. \$800/20 sessions. \$1100/30 sessions.

Payment Method:

Method:

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

****Agreement:****

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

Parent/Guardian Signature: _____

Date: _____

Please submit this registration form along with the payment to secure your child's spot in the program. For inquiries, contact us at: 646-577-3351 or Email: office@tigerbadminton.com