

TIGER BADMINTON TRAINING CENTER MEMBERSHIP APPLICATION FORM

Welcome to TBTC. Please complete this application form and sign the following credit card authorization form. And please read the policy carefully and obey the club's rules.

First Name:_____ Last Name:_____

Cell Phone:_____ E-mail:_____

Address:_____

Date of Birth:_____

How did you hear about TBTC?

() Advertisement. () Email. () Walked-by. () Friend. () Colleague

Company Name (If applicable):_____Your job title:_____

More about you:

() Married. () Single. () Partner

Spouse/Partner Name:_____

Your favorite time to play badminton: () Daytime. () Nighttime

Credit card authorization form for membership

Date:_____, I,_____,hereby authorize

TBTC to charge my credit card in the amount listed below for my TBTC membership.

Type of membership (choice one)

() \$1200/12 months (deduct \$14/day);

() \$800/8 months (deduct \$15/day);

() \$600/6 months (deduct \$16/day).

Credit card information:

Cart type: () MasterCard. () Visa. () Amex.

Credit card number:_____

Name on card:_____. Security number/CVC code:_____

Expiration date:_____.

The undersigned hereby authorizes the charges indicated above. We do not allow cancellations or refunds. Please understand. Thank you.

Cardholder's signature:_____

