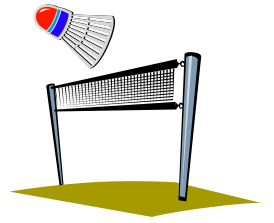




# GREENVILLE BADMINTON CLUB

**Current Playing Location: The Pavilion, 400 Scottswood Drive, Taylors SC**  
**Current Play Times: Mondays & Thursdays (6:30 p.m.—9:00 p.m.)**



Visit us on the web: [www.greenvillebadmintonclub.com](http://www.greenvillebadmintonclub.com)

## Participation & Liability Waiver Form For Season 2019

By signing this form I understand that, in consideration of the Greenville Badminton Club, (hereinafter referred to as the Club), permitting me to participate in playing the Sport of Badminton under its jurisdiction, I hereby release and forever discharge the Club, its Board Members and all its other members, from any and all liabilities arising out of my participation in its activities associated with playing badminton, including travel to and from any venue. I am fully aware of the dangers inherent in this sporting activity, and that I should not participate unless I am medically able and properly trained to do so.

Through the above, and by signing this form, I understand that no medical and/or other insurance is provided for participation in Club activities. I agree to assume sole risk of any injury related to my participation and to make no claims against the Club, its Board, its Management Committee or any individual organizer for any injury or incident arising from this activity, however caused, including liability for negligence.

In addition, I also agree to abide by the Rules, Procedures and recommended Points of Etiquette of the Club at all times and to be liable for any damages caused by my activities. I understand that my participation may be terminated at any time should the Club Board consider my conduct to be detrimental to the reputation or welfare of the Club. I undertake to pay any or all of the appropriately due fees set by the Club for participation in its activities.

**I wish to participate as:**  
**MEMBER or VISITOR for the season 2019 \_\_\_\_\_ (Initial Here)**

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_  
 (Signature of Applicant or Applicant's parent if applicant is under age 18)

### MEMBERSHIP TYPE (Please Circle)

Membership Type	Annual Membership <i>(Paid Once Every Season {Jan 1st - Dec 31st})</i>	PLAYING FEES **	
		Monthly <i>(to be paid on first nights play of each month)</i>	Daily <i>(per night per individual or addition family member)</i>
<b>Single</b>	\$30.00	\$30.00	\$5.00
<b>Family</b> <i>(covers Member, spouse &amp; children)</i>	\$35.00	\$30.00	\$5.00
<b>Senior</b> <i>(65 Years or above)</i>	\$20.00	\$20.00	\$5.00
<b>Student</b> <i>(Full Time High School or Undergraduate student up to 22 years of age)</i>	\$20.00	\$20.00	\$5.00
<b>Non-Member</b>	N/A	N/A	\$10.00

**Special Events:** To be advised as required by posting on the notice board.

\*\* (subject to alteration by the Board to meet changed circumstances with due notice) (Updated January 2019)

**For more info visit us on the web: [www.greenvillebadmintonclub.com](http://www.greenvillebadmintonclub.com)**

## APPLICANT INFORMATION

*(Please Print Clearly in Ink)*

\***First Name:** \_\_\_\_\_

\***Last Name:** \_\_\_\_\_

**Preferred Name:** \_\_\_\_\_

\***E-Mail:** \_\_\_\_\_

\***Cell Phone:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_

**Office Phone:** \_\_\_\_\_

Male \_\_\_\_\_ Female \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ (If under 18)

### PLEASE INITIAL BELOW:

\_\_\_\_\_ Please initial if you agree your \*Starred information can be included on the Member Directory in the Members Only section of the GBC website.

### In Case of Emergency Contact:

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

**Relation:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

## FOR OFFICIAL USE ONLY

These appropriate fees have been paid:

(a) Annual Membership Fee: \$ \_\_\_\_\_  
 Received by: \_\_\_\_\_  
 Treasurer: \_\_\_\_\_  
 Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

(b) Visitors Fee: \$ \_\_\_\_\_  
 Received by: \_\_\_\_\_  
 Treasurer: \_\_\_\_\_  
 Date: \_\_\_\_/\_\_\_\_/\_\_\_\_