RONALD SUSILO BADMINTON ACADEMY REGISTRATION FORM

1. Group Training

Programme	1 x per week (4 sessions per month)	2 x per week (8 sessions per month)	3 x per week (12 sessions per month)	
Basic / Intermediate (U12)	□ \$240	□ \$400	□ \$510	
Intermediate (13 YO and above)	□ \$280	□ \$500	□ \$660	

2. Private Training

Programme	Per session	Monthly ⁱ
One to One	□ \$180	□ \$680
1 x One to One + 1 x Group	□ \$240	□ \$800
1 x One to One + 2 x Group	□ \$280	□ \$960

3. Unlimited Group Training @\$600/month

4. Group Trial session @ \$50.

Please choose your preferred Day/Time:

Monday, 6.30pm – 8.30pm	Saturday, 1pm – 3pm	Sunday, 9am – 11am
Tuesday, 6.45pm – 8.45pm	Saturday, 1pm – 4pm (int)	Sunday, 11am – 1pm
Wednesday, 6.30pm – 8.30pm	Saturday, 3pm – 5pm	Sunday, 11am – 2pm (int)
Thursday, 6.45pm – 8.45pm	Saturday, 3pm – 6pm (int)	Sunday, 9am – 11am
Friday, 7pm – 9pm	Saturday, 5pm – 7pm	Sunday, 2pm – 5pm (int)
		Sunday, 3pm – 5pm

PARTICULARS OF APPLICANT						
Name:				NRIC/BC No:		
Age:	Sex:	Date of Birth:				
Address:						
Home No:	e No: Mobile No:		Email Add	Email Address:		
School/Club:			l			
Give some information about your playing history or attach details:						
PARENT'S/ GUARDIAN'S PARTICULARS						
Name:			Relationship	: FATHER / MOTHER / GUARDIAN		
Mobile No:			Email Addre	SS:		

DECLARATION & INDEMNITY CLAUSE

I, (Parent's/Guardian's name)*	, NRIC:	have read and
understood the terms and conditions	for the programme, I hereby agree to (ou	r above mentioned
child/children/wards' participation)* / partici	pate* in the programme. While reasonable preca	utions will be taken, I
will not hold Ronald Susilo Sports Enterprise	e liable for any death, disability, permanent injury, l	oss of property or any
loss however arising from any cause whats	oever at anytime during our/their* participation in	all activities related to
the above programme.		

Signature of Parent/Guardian * Date:

ⁱ Monthly Rates are based on 4 weeks training. Additional fees apply if there are 5 weeks in a month.