**RONALD SUSILO BADMINTON ACADEMY**

**REGISTRATION FORM**

***Please choose your programme:***

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 ( U 12) | * $230 | * $400 | * $510 |  |
| Intermediate (13 YO and above) | * $280 | * $500 | * $660 |  |

1. ***Private Training***

|  |  |  |
| --- | --- | --- |
| **Programme** | **Per session** | **Monthly[[1]](#endnote-1)** |
| One to One | * $180 | * $680 |
| 1 x One to One + 1 x Group | * $230 | * $760 |
| 1 x One to One + 2 x Group | * $280 | * $920 |

1. ***Group Trial session @ $50.***

***Please choose your preferred Day/Time:***

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| * **Monday, 7pm – 9pm** | | | | * **Friday, 7pm – 9pm** | | | | * **Sunday, 9am – 11am** |
| * **Tuesday, 7pm – 9pm** | | | | * **Saturday, 1pm – 3pm** | | | | * **Sunday, 11am – 1pm** |
| * **Wednesday, 7pm – 9pm** | | | | * **Saturday, 3pm – 5pm** | | | | * **Sunday, 1pm – 3pm** |
| * **Thursday, 7pm – 9pm** | | | | * **Saturday, 5pm – 7pm** | | | |  |
|  | | | | | | | | |
| PARTICULARS OF APPLICANT | | | | | | | | |
| Name: |  | | | | | | NRIC/BC No: | |
| Age: | Sex: | | Date of Birth: | | | | | |
| Address: | | | | | | | | |
| Home No: | | Mobile No: | | | | Email Address: | | |
| School/Club: | | | | | | | | |
| Give some information about your playing history or attach details: | | | | | | | | |
| PARENT’S/ GUARDIAN’S PARTICULARS | | | | | | | | |
| Name: |  | | | | Relationship:FATHER / MOTHER / GUARDIAN | | | |
| Office No: | | Mobile No: | | | Email Address: | | | |

## 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 (our above mentioned child/children/wards’ participation)\* / participate\* in the programme. While reasonable precautions will be taken, I will not hold Ronald Susilo Sports Enterprise liable for any death, disability, permanent injury, loss of property or any loss however arising from any cause whatsoever at anytime during our/their\* participation in all activities related to the above programme.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature of Parent/Guardian \*Date: |

1. Monthly Rates are based on 4 weeks training. Additional fees apply if there are 5 weeks in a month. [↑](#endnote-ref-1)