



BINTANG BADMINTON ADULT CLASS

SEPTEMBER 2010 SUNNYVALE

Student Name : _____

Phone Number: _____ Alternate Phone Number: _____

Email : _____

Note: Each class is limited to THREE students. A completed form with payment is required to guarantee spot.

SEPTEMBER 2010 ADULT BADMINTON CLASSES

Location: Bintang Sunnyvale – 1365 Geneva Drive, Sunnyvale, CA 94089

Tuition: \$70 for 2 lessons (Tuesday); \$105 for 3 lessons (Wednesday)

Class Day/Time: **BEGINNER** **INTERMEDIATE**

_____ Tuesday 6.00 – 7.00PM _____ Wednesday 6.00 – 7.00 PM

For Office Use: payment received by _____ date received: _____ added to class roster by _____

Anticipatory Release of Future Claims / Express Consent Form

I am aware that Badminton is a sport, and I am voluntarily participating in this activity with knowledge of the danger involved and hereby agree to accept any and all risks of property damage, personal injury, or death. In consideration of my participation, I hereby release Bintang Badminton, any of its coaches, instructors, administrators, volunteers or agents, and any other participant in the badminton academy, including but not limited to other team members or volunteers from any present and future claims, including negligence, property damage, personal injury, or wrongful death, arising from my participation in badminton academy activities. Furthermore, I hereby voluntarily waive any and all claims, both present and future, arising from my participation in badminton academy activities, including but not limited to negligence, property damage, personal injury, and wrongful death. I understand that badminton involves certain risks, including but not limited to, travel to and from the site of the activity, tournament or practice, possible physical contact with racquets or shuttlecocks, and the possible conduct of other participants. These risks also include but are not limited to death, serious neck and spinal injuries resulting in complete or partial paralysis, brain damage, and serious injury to virtually all bones, joints, muscles and internal organs. In addition, intense cardio vascular activities and conditioning may result in physical exertion. I also understand that badminton involves a particularly high risk of eye, head, knee, and ankle injury. I further understand that the badminton activities that I participate in may be conducted at sites that are remote from available medical assistance; and nonetheless agree to proceed with such activities in spite of the possible absence of medical assistance.

WAIVER OF LIABILITY

By signing below, I acknowledge that I have read and understand the Anticipatory Release of Future Claims/Express Consent Form appearing on the back of this registration form. Furthermore, I agree to give up legal rights and/or remedies which may be available to me, my parents or legal guardian, or any other party that may institute a claim on my behalf.

SIGNATURE OF STUDENT

DATE

SEPTEMBER 2010 **ADULT** BADMINTON CLASS

Schedule & Notes

Tuesday's	Wednesday's	NOTES: * The September session consists of 2 lessons for Tuesday class and 3 lessons for Wednesday class. * Please note that no credit will be given for missed classes. *Please submit all questions/comments/suggestions to classes@bintangbadminton.org
	9/1 Class	
9/14 Class	9/15 Class	
9/28 Class	9/29 Class	

