

## Mansfield Junior Badminton Club

2015/16 SEASON - Registration Form

Please complete the following information in **full** as we need to be able to communicate with you/your parents.

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_ POST CODE \_\_\_\_\_

D.O.B \_\_\_/\_\_\_/\_\_\_ HOME TEL. \_\_\_\_\_

SCHOOL / YEAR \_\_\_\_\_

PARENTS FIRST NAMES \_\_\_\_\_

PLAYER'S E-MAIL \_\_\_\_\_

PARENTS E-MAIL \_\_\_\_\_

YOUR MOBILE \_\_\_\_\_

PARENTS MOBILE (S) \_\_\_\_\_

ILLNESSES, MEDICATION, ALLERGIES \_\_\_\_\_

\_\_\_\_\_  
In the event of an emergency we will endeavour to contact parents so please ensure all information is kept updated as necessary.

**Annual membership fee £4.00 (Badminton England Insurance)**

Please return the completed form and membership fee to Girish Ravat

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