

Badminton Victoria's Hawks Program

*The Hawks Program will take place entirely at Cordova Bay Hall this year and will be coached by Jeremy Côté and Keith Anton.

*If you have not participated in Badminton Victoria programs before, you must contact the Regional Performance Coach (Jeremy) before registering, as this program is by coach invitation only. If in doubt about program registration, contact Jeremy at badminton@pacificsport.com or 250 881 1881.

Schedule:

<u>Days</u>	<u>Times</u>	<u>Location/Facility</u>	<u>Dates</u>
Saturday	1:00 to 3:00 PM	Cordova Bay Hall	September 19 - Dec 12
Tuesday	6:00 to 8:00 PM	Cordova Bay Hall	September 15 - Dec 15

-Please expect some cancellations throughout the season. We will do our best to contact you regarding cancellations as far in advance as possible. Thanks for your patience.

Scheduled cancellation dates - **December 5th**

NOTE: An email will be sent out with a fuller list of program cancellation dates, and any unexpected cancellations will be emailed with as much notice as possible.

Fees:

One Sessions: \$ 155
Two Sessions: \$ 260

- The registration fee is eligible to be used as a tax credit. Receipts will be issued.
- Grants are available at <<http://www.kidsportvictoria.ca/index.shtml>>

Fees include the following:

- Membership to Badminton Victoria and our provincial sport organization, Badminton BC***
- All training expenses (Feather shuttles, facility rentals, equipment, and year end prizes)
- Tournament administration and coaching (as required)

*** If you have already purchased a Badminton BC Membership for the 2009-2010 season, please contact Jeremy before making program payment.

Badminton Victoria Hawks Athlete Registration Form

Last Name: _____ First Name: _____

Address: _____

Postal Code: _____ Date of Birth: Year _____ Month _____ Day _____

Home Phone #: _____ Email: _____

School attending: _____ Grade: _____

Parent Name: _____ Parents Work #: _____

Parent Name: _____ Parents Work #: _____

Parent Email (if different from the one above): _____

Please check the box if you are interested in volunteering at this seasons tournaments.

Please checkmark the box of which days you will be registering:

Saturday	1:00 to 3:00 PM	Cordova Bay Hall
Tuesday	6:00 to 8:00 PM	Cordova Bay Hall

Fees:

One Session:	\$ 155
Two Sessions:	\$ 260

TOTAL REGISTRATION FEES PAID: \$ _____

Please fill out the above and sign below. Forms and cheques can be dropped off or sent to the following address:

***Please make cheques payable to "Badminton Victoria"**

Badminton Victoria
Suite 100 - 4636 Elk Lake Dr.
Victoria, BC V8Z 5M1

Badminton Victoria - Athlete Medical Form

Participant Information:

Last Name: _____ First Name: _____

Address: _____

Postal Code: _____ Date of Birth: Year _____ Month _____ Day _____

Home Phone #: _____

Parent/Guardian Information:

Parent Name: _____ Parents Work #: _____

Parent Name: _____ Parents Work #: _____

Emergency Contact Information:

Name: _____

Phone: _____

Relationship: _____

Medical Information:

Family Doctor: _____ Phone: _____

BC Care Card #: _____

Allergies: _____ Does Your Child Carry An Epi-Pen? _____

Medical Concerns: _____

Medical Transport Permission

As parent/Guardian of _____, I authorize Coaches / Chaperones to:

1. Contact parents / guardian if my child becomes ill, OR
2. If parents / guardians cannot be reached to make arrangements to send my child to the home of the emergency contact person
3. Where parents / guardians cannot be reached, in the case of emergency, to contact our family doctor, transport to hospital or medical clinic, for appropriate care as deemed necessary by Coaches / Chaperones.

Name: _____ Signature: _____ Date: _____

BADMINTON VICTORIA MEMBERSHIP - For **parents of
Badminton Victoria athletes (recommended, though optional)
2009-2010**

www.badmintonvictoria.com

Annual membership \$10.00: September 1, 2009 – August 31, 2010

Required Information:

(First Name)

(Last Name)

(Mailing Address)

(Home Phone)

(Daytime Phone)

(Email Address)

Optional Information:

Do you wish to receive email about Tournament Announcements, General Badminton Information and Special Offers from Badminton Victoria? **Yes** ___ **No** ___

Skill Level: **Beginner** ___ **Recreational** ___ **Intermediate** ___ **Advanced** ___

Primary Badminton Club Name: _____

Day(s) of Your Play: **Sun** ___ **Mon** ___ **Tue** ___ **Wed** ___ **Thu** ___ **Fri** ___ **Sat** ___

Club Court Time: **AM** ___ **PM** ___

Interested in Lessons? **Private** ___ **Semi-Private** ___ **Group** ___

Interested in Tournaments? **Recreational** ___ **Competitive** ___

Note: Payment by cash or cheque only; Cheque payable to 'Badminton Victoria'