

PACIFIC BADMINTON CLUB



Juniata

www.PacificBadminton.co.nz Email: PacificClubNZ@gmail.com

2026 JUNIOR MEMBERSHIP APPLICATION FORM

Name _____ **Gender :** *Male / Female
(First Name) (Middle Name) (Family Name)

Date of Birth _____ / _____ / _____
Day Month Year

Year/Form Attending in 2026 _____

Name of School attending in 2026 _____

Home Address

Mobile

[illegible]

Name of Parent/Guardian _____ **Relationship** _____

Mobile **E-mail**

Fee: Membership fee **\$420 per year** - pay by cash or internet banking

Declaration:

I understand that:

- A/ If this application is not accepted for any reason, the fee paid will be refunded in full and no further claim can be made. After the acceptance of membership, no refund will be made by the Club should I resign for any reason or expelled from the club for misbehaving after warnings.
- B/ The club is not liable for any claim on any injury, damage or losses.
- C/ There will be no club day when courts are not available.
- D/ I must wear my club shirt and not playing with mobile phone and/or any devices during club hours.
- E/ I will follow the rules and regulations set by Auckland Badminton Association.

I *do / do not have any medical condition. If Yes, list details: _____

Member Signature _____ Date _____

As the Parent/Guardian of the applicant, I give consent for the applicant to join Pacific Badminton Club

Parent/Guardian Signature _____ Date _____

I have read the Junior Membership Information and agree to the terms and conditions.

**** FOR OFFICIAL USE ONLY ****

Amount \$ _____ Date Paid by Internet banking _____ Checked by _____

Membership No. J_____

Remarks _____