
Badminton Wales
Dragon Series

**Player Entry Form – Please use for one tournament only!**

|  |  |
| --- | --- |
| SURNAME | FORENAME |
| DATE OF BIRTH | MALE | FEMALE |
| ADDRESS |
| POSTCODE |
| EMAIL |
| MOBILE/EMERGENCY No |
| PARENT/GUARDIAN NAME |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Section | PARTNERS NAME | TICK TO ENTER | FEE | Event (e.g. Bala) |
| U11 Singles (Boys & Girls) |  |  | £5.00 |  |
| U11 Doubles (Boys & Girls) |  |  | £5.00 |  |
| U13 Boys Singles |  |  | £5.00 |  |
| U13 Girls Singles |  |  | £5.00 |  |
| U13 Boys Doubles |  |  | £5.00 |  |
| U13 Girls Doubles |  |  | £5.00 |  |
| U15 Boys Singles |  |  | £5.00 |  |
| U15 Girls Singles |  |  | £5.00 |  |
| U15 Boys Doubles |  |  | £5.00 |  |
| U15 Girls Doubles |  |  | £5.00 |  |
| U17 Boys Singles |  |  | £5.00 |  |
| U17 Girls Singles |  |  | £5.00 |  |
| U17 Boys Doubles |  |  | £5.00 |  |
| U17 Girls Doubles |  |  | £5.00 |  |
|  TOTALPayment on the day or via Bank Transfer:Welsh Badminton Union Ltd.30-96-9102529177 |  |  |

***Age on the 1st Sept 2021. The fee is £5 per section per event. This fee is payable on the day or via BACS – We cannot accept cheques. Please note that the number of sections may be limited on the day to the players actual age group due to event capacity. All entries must be received 7 days before the event. The draw and timings will be released 5 days before the event. In the case of dispute, etc, the organiser’s word is final. Due to the beginner nature of the event, it shall be played using plastic shuttles. Please tick to confirm that you have read and understand the above***

Please return this form via e-mail to our Development Team: natasha.cutter@badminton.wales

|  |
| --- |
| PARENT/GUARDIAN DECLARATIONI confirm that all details provided above are correct and the player and I have read, understood, and agree to abide by the tournament rules. I hereby consent to them entering this tournament & I accept full responsibility for his/her behaviour throughout the tournament.If your child has any medical conditions that you believe the tournament organisers should be made aware of, please advise an official at registration on the day.Signed …………………………………………………………………… Date ………………………………...If you **do not wish** for photos of your child to be taken and used to promote Badminton Wales activities, please sign here.Signed …………………………………………………………………… Date ………………………………... |