



DATE :

COMPETITION ENTRY FORM

First name	:	.....	Initials	:	.....
Last name	:	.....	Inserts	:	.....
Date of birth	:	.....	Gender	:	M | F
Address	:	.....	House number	:	.....
Zip code	:	.....	Residence	:	.....
Phone number	:	.....		
E-mail address	:	.....		
This email address is used for communication and billing purposes.					

COMPETITION ENTRY DETAILS

Question	Answer	
	YES	NO
Would you like to play competition next season (from September to February)?		
Have you played competition before?		
If so, how many years?		
If yes, in which team / association		
Do you have club clothing?		
<i>See page 2 / see overleaf</i>		



Do you have a preference to play with someone? (specify maximum 1 preference) ¹⁾		
Can you play on Saturday and on Sunday	Saturday:	Sunday:
Question	Answer	
	YES	NO
Do you have a car for transportation to away matches		
Can teammates possibly ride along?		

- 1 Your wishes will be taken into account as much as possible when assembling the teams. However, we can deviate from this.
- 2 By signing this form, you agree to the contribution rate that belongs to participation in competition.
- 3 You are expected to participate as much as possible in the club trainings of your training group.
- 4 You are expected to be present at all matches. If you are unable to attend, please report this in time within your team and to the competition leader, so that a substitute can be arranged if possible.

Note: If a team does not show up complete or at all, a fine will be imposed by Badminton Nederland. This fine will be recouped from the team or absent team member!

City :

Date :

Signature (*) :

(*) Minor members must have this form signed by their parents or legal guardians

Please hand in the form to the board / trainer or email to tc@vanzijderveld.nl

Deadline