

Ballarat Badminton Association
Junior Development Program - School Clinics 2010

Name of School: _____ Telephone: _____

Contact Person: _____ Fax Number: _____

Email: _____ (confirmations will be emailed directly to contact person)

Day preferred to attend clinic (please mark in order of preference)

Tuesday 13 th April	<input type="checkbox"/>	Wednesday 14 th April	<input type="checkbox"/>	Thursday 15 th April	<input type="checkbox"/>
Friday 16 th April	<input type="checkbox"/>	Monday 19 th April	<input type="checkbox"/>	Tuesday 20 th April	<input type="checkbox"/>
Wednesday 21 st April	<input type="checkbox"/>	Thursday 22 nd April	<input type="checkbox"/>	Friday 23 rd April	<input type="checkbox"/>

Time preferred to attend clinic (please mark in order of preference)

9:30am	<input type="checkbox"/>	10:30am	<input type="checkbox"/>	11:30am	<input type="checkbox"/>
1:00pm	<input type="checkbox"/>	2:00pm	<input type="checkbox"/>		

Number of sessions required (only one session per group)

Number of students attending each session

Please mark your preferred day/time in order of preference so that if your first preference is taken by another school we can negotiate an alternative time with you.

Thank you for taking the time to complete this form.

Please send it to: **Ballarat Badminton Stadium by 19th March 2010**

Email: ballbadminton@hotmail.net.au Fax: 5339 4604

Forms are available at www.ballaratbadminton.com

Further information may be obtained from Kristine Thomas at the Badminton Stadium (5339 4601).