



SQUASH PRIVATE COACHING REGISTRATION FORM (UTIMATE SQUASHER)



FULL NAME OF MEMBER <i>(Please underline surname)</i>	CSC CLUB MEMBERSHIP NUMBER
DATE OF BIRTH AND AGE OF PARTICIPANT	GENDER OF PARTICIPANT
CONTACT NUMBER	EMAIL ADDRESS
Preferred Coach (www.shorturl.at/pCDM9) :	

COACHING RATES PER HOUR (Inclusive of 8% GST)

MEMBERS ONLY (Please Circle)

Kid or Adult: 1 Pax : \$ 108.00 (WSF Level 1 Coach)	Kid or Adult: 1 Pax : \$ 124.20 (WSF Level 2 Coach)
Kids or Adults: 2 Pax : \$ 124.20 (WSF Level 1 Coach)	Kids or Adults: 2 Pax : \$ 135.00 (WSF Level 2 Coach)

TERMS AND CONDITIONS

- Eligibility:** Only CSC members are allowed for private coaching in the club.
- Coach:** All lessons are subject to the availability of the trainee's preferred coach
- Court booking:** The CSC member will be responsible for booking the squash court for the lesson.
- Cancellation:** Notice of any cancellations must be provided no later than 12 pm on the day prior to the day of the lesson. Otherwise, the full lesson fee will be charged to the CSC member's membership account.
- Photographs and Videos:** CSC may use any photographs or videos taken during the training sessions for publicity materials unless otherwise indicated by the participant in writing along with the submission of this form.
- Payment:** The coaching fees shall be charged to the CSC member's membership account on a monthly basis.

Should you require any further clarifications, please do not hesitate to contact Jonathon Loh at 68850671 or email Jonathon_Loh@chineseswimmingclub.org.sg

MEDICAL CONDITIONS

Does the participant have any existing allergies, medical conditions or any other circumstances, or is the participant under any form of long-term medication that we should be aware of? If so, please provide a description, and depending on the severity of the participant's medical conditions or circumstances, CSC reserve the right not to accept the registration of the participant.

ACKNOWLEDGEMENT AND WAIVER

I hereby declare that all my particulars given in this form are true and correct, and agree to the above Terms and Conditions. I hereby acknowledge, agree, declare and confirm that CSC and or its partners, officers and employees are not responsible and not liable for any injury, damages, illness, accident, or death howsoever arising which may occur to me and/or my guests at any time during the training program and I, hereby release absolutely from all responsibility and all liability CSC for any injury, damages, illness, accident, death howsoever arising which may occur to me and/or my guests at any time during the training program and hereby agree and undertake to indemnify and keep indemnified CSC and or its partners, officers and employees from and against any liability, damages and costs of defending such claims whatsoever in respect thereof. I hereby further declare and confirm that I have the requisite capacity to acknowledge, agree, declare and confirm the aforesaid.

SIGNATURE OF PARTICIPANT	DATE
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