

**Ottawa & District Badminton Association
2011-2012 Club Affiliation Form (Insurance at bottom)**

Please complete this **ENTIRE** form if you require both affiliation & insurance. Please fill out only the top portion if you only require affiliation. Photocopy for your records, and send with your fee, to:

**Ottawa District Badminton Association,
c/o ODBA Treasurer, Jianguo Zhou, 47 Rivergreen Cres, Kanata, ON K2M 2W9**

Please note: This form is used to update the B.On website - *Where to Play*

Club Name: _____ **Facility Name:** _____
 Club/Facility address: _____ **Nearest Intersection:** _____
 City/postal code: _____

Club email: _____ **Club web site:** _____

Club type: Adult Junior Adult & Junior (please circle one) **Days open:** (please circle) M T W T F S S

Club contact (for mailings and inquiries):

Name: _____ **Email:** _____
 Position: _____
 Mailing address: _____

Phone (Home): _____ **Cell:** _____

Membership Numbers:

Junior (Under 19):	Male: _____	Female: _____	Senior (Over 19):	Male: _____	Female: _____
Officials*:	Male: _____	Female: _____	Coaches*:	Male: _____	Female: _____

**Do not include coaches/officials in junior, senior or master count. Please leave separated out. Thank you!*

Master (Over 35): Male: _____ Female: _____ **TOTAL:**

Please submit a list of names of club players, noting who are coaches & officials. Please identify their gender as the government requires this info.

Fee enclosed \$3 per member:

2011-2012 Insurance Form

\$5 million General Liability Insurance
 Fee enclosed \$3.00 per member:

Additional: Player's Sport Accident Coverage (within Canada)
 Fee enclosed \$1.00 per member:
 (or \$80 if your club has more than 80 members)

Accident coverage is OPTIONAL

Important: Please name your school board for additional insured: _____

If a badminton camp is run as part of the club's badminton programme, all those players not listed separately as club members must be listed and the fee paid. The players, by paying the camp fee, become members of the club for the duration of the camp.

Our club agrees to affiliate with our district immediately on receipt of the forms from the District Executive. We also agree to meet the requirement of this insurance program, providing an update of our membership and coaching staff, and submitting \$3.00 for each new member in January 2012 and May 2012.

Signed: _____ Date: _____