



TAEKWONDO TRAINING PROGRAMME NEW INTAKE

Sundays, 4.00pm to 5.30pm at Activity Suite 2, Sports Complex

Registration Form

Trainee Name (as in BC / IC): _____ Chinese Name: _____

BC/NRIC No.: _____ Date of Birth: _____ Age: _____ Sex : _____

Nationality: _____ Email: _____

Address: _____ S'pore ()

Parent's Name: _____ A/C No. : _____

Contact No: _____(HM) _____(O) _____(HP)

Rules & Regulations

1. I hereby authorize the Club to debit the Taekwondo fee of \$37.45 (incl. of 7% GST) per month to my account, as well as a one-time fee of \$85.60 for the uniform (Gi & belt)..
2. I understand that the fee would not be refund or pro-rated.
3. I agree to pay the fee every month, even if I do not come for regular training.
4. I understand that this application must be accompanied with **2 passport size photographs and Birth Certificate** of the above participant.

Members' Undertaking

1. Withdrawal notice received by the Club on or before the 15th of the month will be processed within the month.
Charges for the activity will cease in the following month.
2. Withdrawal notice received by the Club after the 15th day of the month will be processed in the following month. Charges for the activity will be debited accordingly in the following month and cease thereafter.
3. Only the OFFICIAL Withdrawal Form obtainable from Sports Counter, Sports Complex is acceptable.

Indemnity

In this declaration, I hereby agree that I will not hold Chinese Swimming Club, their appointed staff or officials responsible in any way for any mishaps, injuries or loss of life or for loss of damage to any property howsoever arising out of or in the course of or in connection with the above activities; and I shall indemnify Chinese Swimming Club and their appointed staff and officials from and against any actions, proceedings, liabilities, claims, damages, cost and expenses which may be brought by or asserted against any them by any person in connection with the same.

I hereby agree to abide by the rules and regulations stipulated above, subjected to any amendments from time to time.

Member's Signature

Date

FOR OFFICE USE

| | | | |
|-------------------|---------|----------------|------------|
| Date Received | : _____ | Effective Date | : _____ |
| Officer-in-charge | : _____ | Billing Amount | : \$ _____ |
| Remarks | : _____ | | |