

OPT OUT FORM FOR JUNIOR/JUNIOR TERM MEMBER (AGE 15 & ABOVE) TO SIGN IN GUESTS

PRINCIPAL MEMBER'S PARTICULARS	
Name:	Account No.:
Tel No.:	
I wish to opt out my *child/children to sign in guest	s as per *name/s listed below:
Name: *Mas/Ms	
Note: The above request will be processed and it will ta	ake affect on the 1st of next month.
Signature of Principal Member / Date	
* Delete where inapplicable	

Oct 2020