

REGISTRATION & WAIVER FORM

NRIC/Passport No.	Name of Participant		Date of Birth	Gender Bloo	od
Address			Email Contact Number	er	
Name of Emergency Contact Per	son	Relationship to Participa	nt	Emergency Contact Number	
Do you have any conditions that If yes, please provide information	may adversely affect your capacity	y to participate in this activity?		Yes / No	
THIS DOCUMENT IS A LEGA UNDERSTOOD AND ACCEPTED ARE WAIVING YOUR RIGHTS YOURSELF OR YOUR PROPER' ACKNOWLEDGEMENT I acknowledge that there are signiful further acknowledge the nature a use of the facilities, and that other to the state of the facilities, and that other to the state of the facilities, and that other to the state of the facilities, and that other to the state of the facilities, and that other to the state of the facilities, and that other than the state of the facilities of the facilities, and that other than the state of the facilities of the facil	icant elements of risk associated with and extent of the risks inherent in the unknown and unanticipated risks material risks and RISK AND RESPONSIBILITY tion of the inherent risks of the actiful myself, my/our heirs, representative olders, agents and employees, for an ashareholders, agents and employees a facilities or equipment, whether my	BY SIGNING THIS AGREEMEN IS STATED IN THIS AGREEMEN IN TO RECOVER COMPENSATION IN THE ACTIVITIES ACCORDED TO THE ACTIVITIES ACCORDED TO THE ACTIVITIES AND ACCORDED TO THE ACTIVITIES ASSOCIATED TO THE ACTIVITIES ASSOCIAT	or Normal Part of the Action o	WLEDGE AND AGREE THATER REMEDY FOR ANY INJURATE AND ANY INJURATE AND ASSOCIATED WITH A STATE ASSOCIATED WITH A STATE AND ASSOCIATED WITH A STATE AND ASSOCIATED WITH A STATE ASSOCIATED WITH A STA	T YOU TRY TO with the ch I am gree no h I may of or ir
I further certify, acknowledge and a I am (we are) physically and menta I/we assume responsibility for and I/we assume responsibility for dam	h from any and all liabilities or claim agree on behalf of myself and/or any ally capable of participating in the ac voluntarily assume the risks for any age to my/our personal property, and or injury caused by the negligence of	minor children for which I am respectivity and/or use the equipment, personal injury, death and related ed	oonsible, that:		
UNDERTAKING BY APPLICAN	NT Ormation above. Information provid		nowledge and I did not withhol	d any vital information. I am	
GUARDIAN'S CONSENT (For applicants under the age of 18 I, as parent or guardian of the above this agreement.	years old) e named minor child under the age of	of 18 years, hereby acknowledge rea	iding, understanding and agree	ing to the terms and conditions	of
Name of Parent / Guardian		Signature	Date	e	