



MEMBERSHIP REGISTRATION FORM

This form may take you 5 mins to fill in.

Please also attach the following documents:

1. Copy of * child's /ward's NRIC or birth certificate
2. Copy of parent's /guardian's NRIC

| PART 1 | | |
|---|---|-------------------------------------|
| Name in NRIC/BC [in BLOCK and <u>underline surname</u>] | | Chinese Characters [If Applicable]: |
| NRIC/BC No: | Date of Birth [DD/MM/YY]: | |
| Race: | Gender <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE | |
| School presently in: | Class: | Form teacher: |
| Name of Parent/Guardian [Mr/Mdm/Mrs/Ms]* | | Relationship: |
| Home address: | | Postal code: |
| [Home No.] _____ [H/P1] _____ [H/P2]: _____ | | |
| PART 2 | | |
| I hereby acknowledge that my child/ ward [Please tick one] | | |
| <input type="checkbox"/> | <u>Does not</u> have any allergies/ medical conditions that I know of *. | |
| <input type="checkbox"/> | Has the following allergies/ medical conditions: _____ _____ _____ | |
| <ul style="list-style-type: none"> • If unsure, please consult a doctor or bring child's health booklet to the RC. <p>The Centre will ensure to the best of our ability that the indicated substances will not be present in the foods the centre prepare. The Centre will not be held accountable for foods purchased and consumed outside by the child. It is the duty of the parents/ guardian to ensure that updated information [if any] is provided to the centre.</p> | | |





PART 3

I declare that:

- i. The information given in this registration form is true and correct. I will provide CATCHplus with the necessary documents for verification of the information given as and when required.
- ii. I give consent for my child/ ward* to participate in CATCHplus Programmes on my own accord. In consideration of my child/ ward's* participation in the programme, I shall not hold CATCHplus, Jalan Kukoh Residents' Committee, People's Association, their officers, agents, employees and volunteers liable for any damage to or loss of property or any injury or loss of life where such damage to, loss of property or any injury or loss of life is not caused by the negligence of CATCHplus, Jalan Kukoh Residents' Committee, People's Association, their officers, agents, employees and volunteers.
- iii. I voluntarily grant CATCHplus, its affiliated entities, partners and sponsors permission to photograph and/or video record my child/ ward, record my child/ ward's voice, reproduce my child/ ward's voice and picture, and use my child/ ward's name, voice, picture or likeness in and in connection with any advertising, publicity and promotional activities, national media broadcast, print media, CATCHplus newsletters, website and social media platforms related to the CATCHplus programme.

| | | |
|--------------------------|-----------|------|
| Name of Parent/ Guardian | Signature | Date |
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FOR OFFICIAL USE

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| Remarks: | Endorsed by: |
|----------|--------------|

* Delete as necessary

JKRC/RF/01/2014

