

(Closing Date 20th August 2016)

| Please tick only ONE of | f the following Categories | (\$15 per person) |
|-------------------------|----------------------------|-------------------|
| □ Men's Doubles Open    | Mixed Doubles Open         | □ Women's Doubles |

□Men's Veteran Doubles (age 50 & above as at 31<sup>st</sup> December 2016)

| PLAYER #1 Name: |                | Contact No: |      |  |
|-----------------|----------------|-------------|------|--|
| NRIC:           | Date of Birth: | Age:        | Sex: |  |
| Address:        |                |             |      |  |
| PLAYER #2 Name: |                | Contact No: |      |  |
| NRIC:           | Date of Birth: | Age:        | Sex: |  |
| Address:        |                |             |      |  |

## **INDEMITY**

I am aware that my participation in the activity involves a certain amount of risks. I understand that I will have to cooperate fully with the organizer and diligently comply with all safety regulations. I shall therefore not hold the People's Association or their servants and agents responsible for any damage to or loss of property or any injury or loss of life which may be sustained by me during the activity or arising from any cause in connection with the activity where such damage to or loss of property or any injury or loss of life is not caused by the negligence or wilful act or omission of the People's Association or their servants or agents.

Signature Player #1

Signature Player #2

## TO BE COMPLETED BY THE PARENT/LEGAL GUARDIAN OF PARTICIPANT WHO IS BELOW 21 YEARS OF AGE AS AT 10<sup>th</sup>SEPTEMBER 2016 (DAY OF TOURNAMENT)

| I, (Name) | , (NRIC), | (For Player #1) |
|-----------|-----------|-----------------|
| I, (Name) | , (NRIC), | (For Player #2) |

am aware that my child's participation in the activity involves a certain amount of risks. I understand that my child will have to co-operate fully with the organizer and diligently comply with all safety regulations. I shall therefore not hold the People's Association or their servants and agents responsible for any damage to or loss of property or any injury or loss of life which may be sustained by my child during the activity or arising from any cause in connection with the activity where such damage to or loss of property or any injury or loss of life is not caused by the negligence or wilful act or omission of the People's Association or their servants or agents.

| Contact Number (For Player #1)          | Parent's / Legal Guardian's Signature & Date (For Player #1) |  |
|---|--|--|
| Contact Number (For Player #2)          | Parent's / Legal Guardian's Signature & Date (For Player #2) |  |
| Received By (Staff) / Date / Signature: |  |  |