



Registration Form

Course/ Event: _____

Name: _____

Membership No: _____

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

Address: _____

Email Address: _____

Participation Fee: _____

Remarks (if any): _____

INDEMNITY

I,UNDERTAKE TO INDEMNIFY AND KEEP INDEMNIFIED THE SIA GROUP SPORTS CLUB, ITS CLIENTS AND AGENTS OF ALL CLAIMS ARISING OUT OF ANY INJURY, DAMAGE OR LOSS SUFFERED OR CAUSED IN THE COURSE OF MY PARTICIPATION IN THE ABOVE COURSE, INCLUDING ALL COSTS AND EXPENSES INCURRED AS A RESULT OF SUCH CLAIMS.

Date

Signature

.....
For Official Use

Receipt No: _____

Date