

Yes

## SINGAPORE TABLE TENNIS ASSOCIATION TABLE TENNIS COACHING COURSE

affix photo here

Payment Submission Deadline: 3rd October 2017

Accessor: \_

Fulfilled the requirements of prerequisite skill test? It is mandatory that all participants are required to participate in the skill test.

No

Course Title	: ITTF-PTT Level	1 Coaching Cou	ırse *				
Medium	: ITTF-PTT Level 1 Coaching Course * : English						
Dates	: 17th - 25th November 2017						
Time							
Time	: 7pm to 10pm  Except on 19th & 25th Nevember 2017 (0cm to 4pm)						
	Except on 18th & 25th November 2017 (9am to 4pm)  (No lesson on 19th November 2017, Sunday)						
Degistration	(No lesson on 19th November 2017, Sunday)						
Registration	: Registration and cheque payment will only be conducted on the skill test day(s)						
Registration Fee	: \$374.50 (inclusive of 7% GST, payment by cheque only, to be submitted on the day of skill test)						
Course Requirement	: 1. 18 years old						
	2. Attend and pass the prerequisite skill test on below available dates.						
	•	nber 2017, Tueso					
	· · · · · · · · · · · · · · · · · · ·	nber 2017, Tueso					
	- 26th Septer	nber 2017, Tuesc	day, 7pm-9pm **				
* Please note that partic	ipants will be award	led a ITTF-PTT C	oaching Level 1 Certificate	as well as an NCAP Techni	ical Level 1		
Certificate (Technical)	upon completion of	the course and m	neeting the 30 hours coachir	ng practice within a year by			
30th November 2018. I	_						
		participants. Prere	equisite skill test will only be	available if there are still v	acancies		
after the previous skill			P 4				
Exemption from Skill Test		•	•	onrocented Singapore from L	voor 2012 2017		
	s. Ex-national coache B. Current STTA coac	• •	ermediate squads who have re	epresented Singapore from y	rear 2013 — 2017		
	i. Current Singapore		nches				
			le Tennis coaches (licence is	eliaible till end of this course.	)		
	-	•	·	ongholo um ollu ol umo oculico)	/		
Note: Please refer to	Annexes for co	ourse informat	ion.				
2. Personal Particul							
	<b>K Letters</b> (Under	line Surname)	Name in Chinese Cha	racters (if applicable):			
Mr/Miss/Mrs*							
Address:							
radiooo.							
			Postal Code				
Gender: Male/Femal	e*	Marital Status	s:	: Occupation:			
	e*	Single / Marrie	s: ed / Divorced*	Occupation:			
	e*		s: ed / Divorced*		th:		
Citizenship:	e*	Single / Marrie NRIC/FIN No.:	s: ed / Divorced*	Occupation: DD/MM/YY of Birt			
Citizenship:	e*	Single / Marrie	s: ed / Divorced*	Occupation:			
Citizenship: Home/Office No.:		Single / Marrie NRIC/FIN No.:	s: ed / Divorced*	Occupation: DD/MM/YY of Birt			
		Single / Marrie NRIC/FIN No.:	s: ed / Divorced*	Occupation: DD/MM/YY of Birt			
Citizenship: Home/Office No.: Email Address (com	pulsory):	Single / Marrie NRIC/FIN No.: Mobile No.:	s: ed / Divorced*	Occupation: DD/MM/YY of Birt			
Citizenship: Home/Office No.: Email Address (com 3. Highest Educatio	pulsory):	Single / Marrie NRIC/FIN No.: Mobile No.:	s: ed / Divorced* :	Occupation:  DD/MM/YY of Birt  Language & Diale	ect Spoken:		
Citizenship: Home/Office No.: Email Address (com	pulsory):	Single / Marrie NRIC/FIN No.: Mobile No.:	s: ed / Divorced*	Occupation: DD/MM/YY of Birt			
Citizenship: Home/Office No.: Email Address (com 3. Highest Educatio	pulsory):	Single / Marrie NRIC/FIN No.: Mobile No.:	s: ed / Divorced* :	Occupation:  DD/MM/YY of Birt  Language & Diale	ect Spoken:		
Citizenship: Home/Office No.: Email Address (com 3. Highest Educatio	pulsory):	Single / Marrie NRIC/FIN No.: Mobile No.:	s: ed / Divorced* :	Occupation:  DD/MM/YY of Birt  Language & Diale	ect Spoken:		
Citizenship: Home/Office No.: Email Address (com 3. Highest Educatio School/Institution	pulsory): nal Standard Att	Single / Marrie NRIC/FIN No.: Mobile No.:  ained** Highest Stand	s: ed / Divorced* :	Occupation:  DD/MM/YY of Birt  Language & Diale	ect Spoken:		
Citizenship: Home/Office No.: Email Address (com 3. Highest Educatio School/Institution 4. Relevant Sports F	pulsory): nal Standard Att	Single / Marrie NRIC/FIN No.: Mobile No.:  ained** Highest Stand	dard Achieved	Occupation:  DD/MM/YY of Birt  Language & Diale  From (MM/YY)	To (MM/YY)		
Citizenship: Home/Office No.: Email Address (com 3. Highest Educatio	pulsory): nal Standard Att	Single / Marrie NRIC/FIN No.: Mobile No.:  ained** Highest Stand	s: ed / Divorced* :	Occupation:  DD/MM/YY of Birt  Language & Diale	ect Spoken:		
Citizenship: Home/Office No.: Email Address (com 3. Highest Educatio School/Institution 4. Relevant Sports F	pulsory): nal Standard Att	Single / Marrie NRIC/FIN No.: Mobile No.:  ained** Highest Stand	dard Achieved	Occupation:  DD/MM/YY of Birt  Language & Diale  From (MM/YY)	To (MM/YY)		
Citizenship: Home/Office No.: Email Address (com 3. Highest Educatio School/Institution 4. Relevant Sports F	pulsory): nal Standard Att	Single / Marrie NRIC/FIN No.: Mobile No.:  ained** Highest Stand	dard Achieved	Occupation:  DD/MM/YY of Birt  Language & Diale  From (MM/YY)	To (MM/YY)		
Citizenship: Home/Office No.: Email Address (com 3. Highest Educatio School/Institution 4. Relevant Sports F	pulsory): nal Standard Att	Single / Marrie NRIC/FIN No.: Mobile No.:  ained** Highest Stand	dard Achieved	Occupation:  DD/MM/YY of Birt  Language & Diale  From (MM/YY)	To (MM/YY)		

5. Coaching Experience**				
Organisation	Coaching Group/ Event		From (MM/YY)	To (MM/YY)
				1
6. Relevant awards, commend	dations, prizes, cer	tificates received**		
Name of Organization	<u>uationo, prizoo, cor</u>	Type of Award		(MM/YY)
Hamo or Organization		Type of Award		(101101)
7. First Aid & CPR Certificate				
Do you have a valid first aid &	& CPR certificate?	If yes, the expiry date	e is:	
Yes/No*				
*Delete wherever appropriate.				
**Attach all supporting documer	nts.			
Terms & Conditions:				

- 1. The STTA reserves the right to postpone, make changes to the course schedule or cancel the course.
- 2. In the event of cancellation of the course, a full refund will be made to the applicant.
- 3. In the event of withdrawal, applicant has to submit in writing at least 1 month before the course commencement date, 80% of the course fee will be refunded. Please provide original receipt for the refund purpose.
- 4. No refund will be made for late withdrawal ie. less than 1 month.
- 5. Full attendance is required for this course.
- 6. There will not be any make-up classes or courses, pro-rating of fees or refund of fees for absenteeism due to any reasons, including but not limited to medical leave, illness, injuries, school exams, holiday...etc. All fees are non-transferable.
- 7. Applicants are required to submit all supporting documents to STTA by the closing date.
- 8. Participants are to be abide to the rules and regulations when making use of the STTA premises during the program.
- 9. STTA reserves the right to reject/disapprove any application without any explanation given. Under such circumstances, full refund will be made to the applicant.
- 10. Course will only commence with a minimum class size of 20 participants. (Max 30 participants)

## **DECLARATION**

I hereby declare that the particulars given above are true and correct to the best of my knowledge. I have read the rules and regulations and agreed to abide by them. I understand that the registration form will be discarded without prior notification given if the information provided is found to be incomplete, illegible or incorrect, or if payment is not settled before the closing date.

## INDEMNITY:

Receipt no.

In this declaration, I hereby agree that I will not hold Singapore Table Tennis Association and their appointed staff or ve laims, the

officials responsible or liable howsoever arising out of or in mentioned organisers and the damages, cost and expenses same.	n the course of or in connecti eir appointed staff and officia	ion with the above activities; a als from and against any action	and I shall indemnify the abouns, proceedings, liabilities, cl
Enclosed is my cheque paym made payable to: Singapor Attn: Amanda Leong			)
Signature of Applicant		Date	e
For Official Use			
□ Payment	□ Photo	□ 0	thers (if any):

Date:

Received by: