



5. Relevant Sports Related Courses Attended**			
Organisations	Highest Standard Achieved	Date (MM/YY)	Remarks (eg. IU No.)

\*Delete where appropriate.

\*\*Attach all supporting documents.

**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 program cancellation, a full refund will be made to the applicant.
3. In the event of withdrawal, in written form by the applicant at least one month before the course commencement date, 80% of the course fees will be refunded. Please provide original receipt for the refund purpose.
4. No refund will be made for late withdrawal ie. less than one month.
5. A minimum of 80% attendance is required to sit for examination(s).
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 abide to the rules and regulations when making use of the STTA premises during the program.
9. Full payment is to be made via cheque during registration.
10. STTA reserves the right to reject/disapprove any application without any explanation given. Under such circumstances, full refund will be made to the applicant.

**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:**

*In this declaration, I hereby agree that I will not hold Singapore Table Tennis Association and their appointed staff or officials responsible or liable in any way for any mishaps, injuries, loss of life, loss of or damage to any property howsoever arising out of or in the course of or in connection with the above activities; and I shall indemnify the above mentioned organisers and their appointed staff and officials from and against any actions, proceedings, liabilities, claims, damages, cost and expenses which may be brought by or asserted against them by any person in connection with the same.*

**I have read and understood the above terms and conditions and agree to abide by them.**

Enclosed is my cheque payment of \$\_\_\_\_\_ (Bank/ Cheque no.: \_\_\_\_\_)

**made payable to: Singapore Table Tennis Association**

Attn: Amanda Leong

Refund cheque payee's name: \_\_\_\_\_

Cheque mailing address: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

For Official Use		
<input type="checkbox"/> Payment	<input type="checkbox"/> Photo	<input type="checkbox"/> Others (if any): _____
Receipt no. _____	Received by: _____	Date: _____

Remarks:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_