



Charity Athlete Registration Form

1. Personal Particulars

Name:	NRIC:		
Gender:			
Date of Birth:			
Address:			
Contact No:	(Residential)	(Home)	(H/P)
Email:			

2. Emergency Contact Details

Name:			
Contact No:	(Residential)	(Home)	(H/P)

3. Running Information

Category: Run <input type="checkbox"/>	Swim <input type="checkbox"/>	Cycle <input type="checkbox"/>	
Name of Event:			
Running Distance:			
Tshirt Size: S <input type="checkbox"/>	M <input type="checkbox"/>	L <input type="checkbox"/>	XL <input type="checkbox"/>
I hope to raise: S\$			

4. Optional

I am running in honour/memory of _____.

5. Please read and sign

I, _____ (Name & NRIC), hereby release and discharge Singapore Cancer Society (SCS) from any and all liability arising from any illness, injuries or damages I may suffer as a result of participating in "SCS Charity Athlete" programme. Signature: _____
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