



A Labour Movement initiative driven by NTUC Club

U-Run 2010

REGISTRATION / INDEMNITY FORM

Category	Registration Fee (Member)	Registration fee (Public)
Men's Individual 8 km	*\$12 (Early Bird) / \$15	*\$15 (Early Bird) /\$20
Women's Individual 8 km	*\$12 (Early Bird) / \$15	*\$15 (Early Bird) /\$20

**Early Bird rates is only available for registration from 15 Mar 2010 – 4 April 2010*

PARTICIPANT'S PARTICULARS

VENUE: NTUC CLUB, DOWNTOWN EAST (1 PASIR RIS CLOSE, SINGAPORE 519599)	DATE & TIME: 9 TH MAY 2010, 7AM – 11AM
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<p>FULL NAME (as in NRIC): _____</p> <p>GENDER: M / F (Please Circle One)</p> <p>DATE OF BIRTH (DD/MM/YY): _____</p> <p>NATIONALITY: _____</p> <p>MAILING ADDRESS: Block: _____ Street: _____ Unit: _____ Postal Code: _____</p>	<p>NRIC NO: _____</p> <p>HOME NO: _____</p> <p>MOBILE NO: _____</p> <p>Email: _____</p> <p>NAME & EMERGENCY CONTACT NO: _____</p> <p>RUN TEE SIZE: Men's: S / M / L / XL / XXL Women's: S / M / L / XL</p>
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NTUC MEMBER: YES / NO (Please Circle One)	
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MEDICAL HISTORY (if applicable): _____ _____	DRUG ALLERGIES (if any): _____ _____ BLOOD TYPE: _____
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COMPETITION TYPE (please indicate <u>one</u> type only): <input type="checkbox"/> MEN'S INDIVIDUAL (8KM) <input type="checkbox"/> WOMEN'S INDIVIDUAL (8KM)

WAIVER:
I certify that all information provided herein is true and have agreed to my own participation in this event (i.e. NTUC U-Run 2010) and it's supporting activities. In consideration of my participation, I release and forever discharge the organisers, the event company, appointed staff and officials of any loss of life, claims, actions, damages, costs or expenses that may arise out of or in any way connected with my participation in this event, including travel to and from this event, and including all injuries that may be suffered by myself before, during or after the event. I understand that this includes any claims based on negligence, action or inaction of any of the above parties. I recognise the difficulties of the event and attest that I am sufficiently fit and able to take part in this event, and have not been advised otherwise by a qualified medical professional.

Signature of Participant (above 21 years old)

Date: _____

Please return the completed form (02 pages) via email to kim_tham@ntucclub.com.sg or carrie_soo@ntucclub.com.sg or fax to 6581 3326

Late entries would not be entertained.

For Participants Under 21 Years Of Age (as of 01 May 2010)

I, _____ (name) Parent/Guardian* of _____
(name of participant)

agree to allow my Child/Guardian* to participate in **U-Run 2010**. I understand the conditions stated out in the waiver and shall not hold the organisers, the events company, appointed staff or officials responsible for any mishap, injury or loss of life than may occur, or as a result of his participation in this event.

Signature of Parent/Guardian*

Relationship of Parent/Guardian*

Date: _____

**Delete where appropriate*

Please return the completed form (03 pages if you are under 21 Years Old) via email to kim_tham@ntucclub.com.sg or carrie_soo@ntucclub.com.sg or fax to 6581 3326

Late entries would not be entertained.