



Passport
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APPLICATION FOR ADMISSION Basic Exercise Course (BEC)

Date	Course Notation	Basic Exercise Course (BEC) (@\$280/=)
Aug-09	BEC/08/2009/IACT	01/08/09 & 02/08/09 ()

Please tick accordingly (✓) the course you wish to attend

Important Note:

Course will not commence if the minimum number (35pax) of participants is not met.
Registered participants will be informed and full fee will be refunded in such cases.

1. MINIMUM ENTRY REQUIREMENTS

1a. Minimum age of 16 years old and a good understanding of English.

1b. A valid Cardio Pulmonary Resuscitation (CPR) certification is compulsory for the application.

Please attach a copy of the CPR certification to the application.

2. PERSONAL PARTICULARS

Name/NRIC or Passport No. (**IN LEGIBLE BLOCK LETTERS AS PREFERRED ON CERTIFICATE**):

_____ / _____

Date of Birth (dd/mm/yyyy): _____ / _____ / _____ Age: _____ Gender: Male / Female

Nationality: _____ Race: _____

Email Address* _____

Mailing Address _____

_____ Postal Code _____

Phone (Home) _____ (Office) _____ (Mobile*) _____

(*Email Address and Mobile are Compulsory for electronic communication purposes)

3. RELEVANT/HIGHEST EDUCATIONAL QUALIFICATION (Please attach copies of certificates)

Name of Educational Institute	Qualification	From (Year)	To (Year)

4. RELEVANT COACHING/FITNESS/SPORT EXPERIENCE (Please attach documentation)

5. TERMS AND CONDITIONS

Please tick (✓) to acknowledge:

5a. Enrollment for any of the above course creates a binding agreement to follow the course and pay the full fees, even if a student subsequently decides not to complete the course. I-ACTIVE PTE LTD will not entertain any request for refund as a place has been committed for the student.

() I will pay in full the course fee (at least 14 working days) before the course commencement and I understand that my place can only be confirmed after the full payment had been made and an acknowledgement received from the organisation delivering the course. I understand that no request for refund will be entertained upon the confirmation of my place by the organisation administering the course.

5b. Indemnity

() By the registration in this course, I have agreed that I will not hold I-ACTIVE PTE LTD, their appointed staff or officials and its Partners responsible for any mishaps, injuries, damages or loss of life and / or property that may occur in the course of, or as a result of participating in this training program. I will indemnify I-ACTIVE PTE LTD, their appointed staff or officials, and Partners against any actions, proceedings, liabilities, claims, damages and expenses by any party however arising out of or in connection with this course.

6. PAYMENT BY CHEQUE

Please made cheque payable to: **I-ACTIVE PTE LTD**

Mail to: **808 French Road #07-163 Kitchener Complex Singapore 200808**

**Class venue may defer from the mailing address listed above.*

7. DECLARATION AND AUTHORISATION

I hereby apply for the admission to Basic Exercise Course organised by I-ACTIVE PTE LTD. I declare that the information given in this form is true and complete. I understand if falsified information is submitted, admission will be rescinded. If accepted as a student, I will comply with all conditions, rules and regulations of I-ACTIVE PTE LTD.

Signature: _____ Date: _____

FOR MORE INFORMATION PLEASE CONTACT

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