

Appendix A National Training Squad Application Form

Part I Particulars of Applicant

Name : _____ NRIC No : _____
 Gender : _____ Date of Birth : _____
 Address : _____
 _____ Postal Code : _____
 Telephone : _____ (H) _____ (O) Weight : _____
 E-Mail : _____ Height : _____

Part II Selection Required Information

I) Category: Please indicate **ONE** type of selection category with a (✓).

() Junior Men (Under 21) () Junior Women (Under 21)
 () Men () Women

II) Equipment: Please indicate whether you are bringing own equipments: * (Yes / No)

III) Canoe Polo Experience: Please indicate the type of competition you have participated by ticking (✓), indicate the year (last participated), Category and the results (position).

| | | | |
|--|-------------|----------------|---------------|
| () National Canoe Polo Championship | Year: _____ | Category _____ | Result: _____ |
| () SRRR Canoe Polo Championship | Year: _____ | Category _____ | Result: _____ |
| () Selection organized by SCF | Year: _____ | Category _____ | Result: _____ |
| () Others:(pls state:) | Year: _____ | Category _____ | Result: _____ |

Remarks: _____

*(delete accordingly)

Part III - Medical Declaration

Please use the space below to declare any medical conditions that you have in the past and currently have.

Part IV Declaration

I hereby declare that I have read and understood the selection process, selection criteria and I agree to abide by them. I join the National Selection Assessment on my own free accord and hold myself solely responsible for any mishap or injury that may occur during, or as a result of my participation in the stated event.

Signature of Applicant

Date

Part V Parental Consent for Participants under Age 18

I, Mr/Mrs/Miss/Mdm _____, NRIC No. _____, allow my child / ward to participate in the stated event

Signature of Parent/Guardian

Date