

# **SINGAPORE SILAT FEDERATION**

Athletes Registration Form

Year \_\_\_\_\_



**Age Category:** Senior / Junior / Pre – Junior / Pre – Teen / Singa Silat / Singa Cub

**Discipline:** Match / \*Artistic (Single / Double / Team)

*\*Exclude Singa Silat & Singa Cub*

Photo
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Photo
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Personal Particulars			
Name as in NRIC:			Sex: M / F
NRIC:	Date of Birth:	Age:	
Passport No:	Date of Issue:	Date of Expiry:	
Home Address:			
Tel:	(H)	(HP)	E-mail:

Parent's Particulars (Father)			
Name:			
NRIC:	Date of Birth:	Age:	
Home Address:			
Tel:	(H)	(HP)	E-mail:

Parent's Particulars (Mother)			
Name:			
NRIC:	Date of Birth:	Age:	
Home Address:			
Tel:	(H)	(HP)	E-mail:

Spouse / Guardian's Particulars			
Name:			
NRIC:	Date of Birth:	Age:	
Home Address:			
Tel:	(H)	(HP)	E-mail:

School Particular (Part Time / Full Time)			
Name of Institution:			
Address:			
Class:	Stream/Course:		Principal:
Tel:	Fax:	Email:	
CCA:		Days of CCA Activities:	
Teacher-in-charge:		Tel:	
<hr style="width: 20%; margin: auto;"/> School Stamp			

Employment Particular (Part Time / Full Time)			
Name of Company/Employer:			
Address:			
Job Title:		Immediate Supervisor:	
Tel:	Fax:	Email:	
<hr style="width: 20%; margin: auto;"/> Company's Stamp			

Community / Charity Work			
	Name of Event	Date	Responsibilities
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

<b>Silat Involvement</b>	
Name of Silat Club:	
Name of Silat Master:	Signature:
Name of Secretary General:	Signature:
Date Joined:	No. of Years Active:
Day(s) of training (i.e Monday):	Training Centre:
<hr style="width: 30%; margin: auto;"/> <b>Association Stamp</b>	

<b>Previous Silat Involvement</b>	
Name of Silat Club:	
Name of Silat Master:	
Name of Secretary General:	
Date Joined:	No. of Years Active:
Day(s) of training (i.e Monday):	Training Centre:
Reason/s on why you left previous club:	

<b>Other discipline (i.e MMA, Taekwondo)</b>		
Discipline	Club	Year of Active

<b>Apparel Information</b>	
Round Neck T – size:	Polo T – Shirt size:
Silat Uniform size:	Track Suit size:



# ATHLETE'S ACHIEVEMENT

NO.	NAME OF CHAMPIONSHIP	MONTH / YEAR	CATEGORIES	PLACING
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
NO.	NAME OF ACTIVITIES INVOLVED	MONTH / YEAR	REMARKS	
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
NO.	AWARDS / SCHOLARSHIP RECEIVED	MONTH / YEAR	RECEIVED FROM	
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

## **ATHLETE'S CHECKLIST**

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<i>(Kindly attach the following supporting documents with this application form)</i>	NO	YES	NA
1. Applicant's Birth Certificate			
2. Applicant's NRIC / Student Pass			
3. Applicant's Passport Copy			
4. Copy of Bank Account (Parents for younger athletes)			
5. School Timetable			
6. Working Timetable			
7. Applicant's certificates (School activities, Awards/Scholarship, competitions)			
8. Applicant's Medical Report (Past & Current injuries)			
9. Agreement Form			
10. Full Payment (according to the registration fee)			
11. Interview			