

REGISTRATION FORM

Code: YLY / SAN

Full Name:

* School/College/University:

Address:

* Home / Office Telephone No:

Handphone No:

Date of Birth:

Please **circle** participation category:

| | Under-14 | | Under-17 | | Under-23 | | Special Education |
|------------------------------|------------------|-------|------------------|-------|------------------|-------|-------------------|
| Date of Birth | On or after 1999 | | On or after 1996 | | On or after 1990 | | On or after 1996 |
| Present MBSSKL students only | Boys | | Boys | | Boys | Girls | Open |
| Others | Boys | Girls | Boys | Girls | Boys | Girls | Open |

Waiver and Release of Liability:

I request that my child, (named above), be permitted to participate in the July 6, 2013 chess event. I fully understand that it is my responsibility for supervising my child during the event. Should it be necessary for my child to have medical treatment while participating in this event, I give permission to the physician selected by personnel to render medical treatment deemed necessary and appropriate. I as a parent or representative of this child, hereby release, discharge, indemnify, and hold harmless SMK (L) Methodist, Jalan Hang Jebat, Kuala Lumpur and their employees, volunteers or agents, and/or staff, from any claims arising out of, or relating to, any injury that may result the said individual while participating in the event. I, too hereby waive any rights to the taking and use of photographs, or any other recorded materials including video taken during the normal course of the event.

Signature of Parent /
Legal Guardian:

Date:

Name of Parent / Legal Guardian:

Relationship:

For Official Use Only:

RECEIPT

Received from: Mr. / Mrs. / Miss

Amount: **Ringgit Malaysia**

Cash / Cheque No.:

Bank:

Being: Entry fees for the 8th MBSSKL Chess Open Tournament 2013

| | Under-14 | | Under-17 | | Under-23 | | Special Education |
|------------------------------|------------------|-------|------------------|-------|------------------|-------|-------------------|
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Receipt issued by: