SINGAPORE TAEKWONDO FEDERATION ATHLETE'S UNDERTAKING

(Last 4 digit of NRIC No.____)

of (Name of Dojang)			of (Name of Dojang)				
I declare that the information given is true, correct and complete. In the event, that the declaration is false, I may be sanctioned by the relevant authorities.							
Date		Signature					
Disclaimer & Indemnity							
I hereby declare that I shall not claim against the Singapore Taekwondo Federation/SNOC and or any of its officers for any losses and liabilities suffered by me directly or indirectly and I hereby declare that I shall indemnify the Singapore Taekwondo Federation/SNOC and or any of its officers against any claims losses liabilities suffered directly or indirectly as a result of the Selection Trials held on 7 & 8 May 2022 (Saturday & Sunday) or any adjournment thereof at the venue of the selection trial.							
Date	Signature		Contact Number				
Parental/Guardian Consent for Player Below 21 Years of Age							
I consent to the above named, who is my *child/ward to participate in the selection trial. I hereby release the Singapore Taekwondo Federation/SNOC and its agents from all liabilities that may arise in connection therein.							
Name/Relationship to Player		Signature/Date					
Last four digits of NRIC No.			(O)	(Mobile)			
<u>Vaccination Status</u>							
consent that I am fully vaccinated according to MOH requirements. I agree to show proof of vaccination upon request by the Singapore Taekwondo Federation. Athletes certified to be ineligible for vaccination will have to attach a doctor's note together with the application form.							
Name of Player		Date of last dose (state which dose)					

^{*}Please delete accordingly