

Singapore Disability Sports Council

Learn-to-Play Programme Registration



SECTION A: PROGRAMME DETAILS Please read the following carefully.

Sport	:	Sailing (Time to Get Nauti 2017)
Programme Dates	:	Oct 8, 15, 22, 29 & Nov 5, 12 (Sundays), 9am to 1pm
Venue	:	Changi Sailing Club, 32 Netheravon Road, Singapore 508508
Programme Fees	:	<p>\$90* for persons with disability (PWD), \$120 for volunteers</p> <p>Includes 6 sessions of theory and practicum, 1 Wind Direction Indicator, and a tee-shirt.</p> <p>*After 50% subsidy by SDSC. Fees return to fund Sailability¹. Low-income participants may receive financial assistance on a case-by-case² basis.</p>
Slots Available	:	6 slots for PWD, 9 slots for volunteers
Confirmation and Payment	:	A confirmation email will be issued on placement and payment. If overwhelming interest is received, you may be placed on a waitlist.
Transport	:	Free shuttle service between Pasir Ris MRT and Changi Sailing Club

Terms and Conditions

- SDSC shall collect and use the personal information provided to facilitate the running of the programme, as well as planning, data processing, risk analysis and research purposes within SDSC or its agent(s). 'Personal information' refers to all and any information relating to the participants obtained by SDSC in the course of and as a result of the provision of services to the participants. SDSC shall treat participants' personal information as confidential. You understand that you can withdraw your consent at any time via email to sdsc@sdsc.org.sg and SDSC may not be able to continue providing services to you or the participants as a result.
- Registration is only complete upon the confirmation of slot by SDSC and SDSC's receipt of registration fees.
- Whilst reasonable precaution will be taken by SDSC and its agent(s) to ensure participants' safety, participants are to understand that you are taking part in the programme at your own risk. SDSC and its agent(s) will not be held liable for any injury or death arising from participating in the programme or for any loss or damage to your property occurring in the course of the programme, except for such injury or death that is caused directly by SDSC or its agent(s)' breach of legal duty of care.
- The participants undertake that if, in the course of the programme, the participants deliberately or negligently cause any injury (whether fatal or otherwise) to any person or any damage to or loss of any property of any person, the participants shall indemnify SDSC in instance where the suffering party makes claims or takes actions against SDSC or its agent(s) for costs or expenses.
- You understand that photographs and / or videos of participants may be taken during the programme, for use by SDSC on its social media and other promotional material, to promote disability sports.

¹ Sailability is the sailing initiative for persons with disability under the SDSC.

² Please write in to SDSC with your appeal. More information such as proof of household income may be requested thereafter.

SECTION B: REGISTRATION (FOR INDIVIDUALS)

Registration Type	:	<input type="checkbox"/> Aspiring sailor! (only for person with disability) <input type="checkbox"/> A count-on-me volunteer! (Psst... you will learn to sail too!)			
Full Name (as in NRIC / Birth Cert)	:				
NRIC No. / Birth Cert. No	:		Gender	:	<input type="checkbox"/> M <input type="checkbox"/> F
Date of Birth	:		Age	:	
Mailing Address	:				
Contact No.	:				
Email Address	:				
Diagnosis (Disability)	:		Wheelchair User	:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Will be taking shuttle service	:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Tee Shirt Size	:	

Emergency Contact

Name	:				
Relationship to Participant	:				
Emergency Contact No.	:		Language Spoken	:	

SECTION C: REGISTRATION (FOR GROUPS)**Main Contact Person**

School / Club / Organisation:		Address:	
Name:	Gender: Male/Female	Designation in School / Club / Organisation:	
Contact Details:	Tel: _____	Mobile: _____	
	Off: _____	Fax: _____	
Email Address:			

Group Participant Details

Please complete the group participant profile in Annex A.

SECTION D: UNDERTAKING BY INDIVIDUAL PARTICIPANT / MAIN CONTACT PERSON

(Please tick accordingly.)

- I/We have read and understood the programme details, including its terms and conditions, and agree (on behalf of my group) to abide by them. I / My group also hereby release SDSC of all claims and damage that may arise in this programme.
- I/We shall fully cooperate with the instructions and managing staff of the programme.
- All the information submitted are true, accurate and complete. I/We understand that I/we should make further declarations of information if I/we feel that the information would affect the safety of me or my participants in this programme. I/We have not withheld any such information.
- I/We undertake the responsibility to keep SDSC informed of any changes to the information submitted in this form.
- I/We agree that it is my/our responsibility to ensure that I am or we are physically fit to participate in the programme and its sessions. I/we will consult a doctor if I/we have any doubt. I/We will also use the PAR-Q questionnaire (Annex B) as a self-assessment guide before registration.

INDIVIDUAL PARTICIPANT / MAIN CONTACT PERSON

Signed

Date

Print Name

NRIC/Passport No.

PARENT (if participant is under 18 years of age or dependent)

Note: For group registration, the Main Contact Person shall ensure that consent has been sought from parents / guardians if the participant/s fall below 18 years of age, prior to submitting these forms.

Signed

Date

Print Name

NRIC/Passport No.

ANNEX A: GROUP PARTICIPANT PROFILE

We are registering as:

 Aspiring sailors! (persons with disability) Count-on-us volunteers!

S/N	Full Name (As in NRIC / Birth Cert)	NRIC No. / Birth Cert No.	Gender	Date of Birth	Age	Diagnosis (Disability)	Wheelchair User (Y / N)	Taking Shuttle (Y/N)	Tee-Shirt Size
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									

*Note: Please make a duplicate copy if necessary.***EMERGENCY CONTACT**

If the Main Contact Person is also participating in the programme, please designate another Emergency Contact below.

Name	:				
Relationship to Group	:		Emergency Contact No.	:	

ANNEX B: PAR-Q & YOU

The Par-Q is a self-assessment guide to help an individual find out more about whether he / she is fit for the activity at that particular moment. Please read the questions carefully and answer each one honestly, as it concerns your safety.

Note: The Par-Q is designed for and more applicable for users aged 15 to 69 years old. Should you fall below 15 years old, your caregiver should provide the appropriate advice. If you are above 69 years old, you should seek clearance with your doctor before participation.

Q1	Has your doctor ever said that you have a heart condition and that you should only do physical activity recommended by a doctor?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Q2	Do you feel pain in your chest when you do physical activity?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Q3	In the past month, have you had chest pain when you were not doing physical activity?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Q4	Do you lose your balance because of dizziness or do you ever lose consciousness?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Q5	Do you have a bone or joint problem (e.g. back, knee or hip) that could be made worse by a change in your physical activity?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Q6	Is your doctor currently prescribing drugs (e.g. water pills) for your blood pressure or heart condition?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Q7	Do you know of any other reason why you should not be doing physical activity?	<input type="checkbox"/> Yes <input type="checkbox"/> No

If you answer 'Yes' to any question, please obtain medical clearance from a doctor before your registration.