



PARENT / GUARDIAN CONSENT FORM

Youth Golf Programme Handicap / PC League 2017 - Leg 1

Orchid Country Club | Tuesday, 30 May 2017

CONSENT

I, _____, guardian / parent * of _____
Parent's / Guardian's Name *Participant's Name*
(NRIC / Passport No. _____) consent to my son's , daughter's , ward's *
participation in the Youth Golf Programme Handicap / PC League 2017 - Leg 1 to be held
at the Orchid Country Club, Singapore on Tuesday, 30 May 2017.

INDEMNITY

I hereby declare and agree that in consideration of Orchid Country Club, the Organiser, Sponsors and the Club shall be indemnified of all claims of any loss, damage or harm, or any form of injury that the participant may suffer as a result of his / her participation in this tournament.

* Please Delete Accordingly

Signature of Parent / Guardian
Date Signed

For Official Use
Date Received