



**Multidiscipline Engineering Division  
Freshmen Orientation Camp, 16-17 April 2009 (MDE FOC '09)**

**Indemnity Form**

**Particulars of student:**

Name: \_\_\_\_\_ Division / School:   MDE  

Student No: \_\_\_\_\_ NRIC No: \_\_\_\_\_ Handphone No: \_\_\_\_\_

Date of birth: \_\_\_/\_\_\_/\_\_\_ Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Choice of meal: Chinese [  ]      Muslim [  ]      Vegetarian [  ]  
T-shirt size:    Small [  ]      Medium [  ]      Large [  ]      Extra Large [  ]

Health Condition & Medical History:	Yes	No	If yes, please provide details.
a) Asthma and other lung problems	[ <input type="checkbox"/> ]	[ <input type="checkbox"/> ]	_____
b) Eye problems	[ <input type="checkbox"/> ]	[ <input type="checkbox"/> ]	_____
c) Allergy to any medicine, food, etc	[ <input type="checkbox"/> ]	[ <input type="checkbox"/> ]	_____
d) Any previous injury	[ <input type="checkbox"/> ]	[ <input type="checkbox"/> ]	_____
e) Others, please specify	[ <input type="checkbox"/> ]	[ <input type="checkbox"/> ]	_____

**Particulars of Parent/Guardian:**

Name: \_\_\_\_\_ Relationship to student: \_\_\_\_\_

NRIC No: \_\_\_\_\_ Contact No: (Home Tel) \_\_\_\_\_ (Handphone No:) \_\_\_\_\_

Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_

**To be completed by Parent / Guardian of participant below 21 years of age**

(Please delete where appropriate \*)

I, the abovesaid parent / guardian hereby give permission for my \* *son / daughter / ward*, to participate in the overnight stay and I shall not hold Ngee Ann Polytechnic, their appointed staff or officials responsible for any mishap, injury or loss of life that may occur in the course of, or as a result of his / her participation in the abovesaid activity, and also indemnify Ngee Ann Polytechnic and their appointed staff / officials against any claims, action, proceedings, liabilities, damages or expenses by any party howsoever arising out of or in conjunction with the above said activity.

\_\_\_\_\_  
**Signature by Parent / Guardian**

\_\_\_\_\_  
**Date**

**To be completed by Parent / Guardian of participant 21 years old and above**

(Please delete where appropriate \*)

I, \_\_\_\_\_(Name of participant) shall not hold Ngee Ann Polytechnic, their appointed staff or officials responsible for any mishap, injury or loss of life that may occur in the course of, or as a result of my participation in the abovesaid activity, and also indemnify Ngee Ann Polytechnic and their appointed staff / officials against any claims, action, proceedings, liabilities, damages or expenses by any party howsoever arising out of or in conjunction with the above said activity.

\_\_\_\_\_  
**Signature by Participant**

\_\_\_\_\_  
**Date**