



This form may take you **5-8 minutes** to complete.

APPLICATION FOR EXEMPTION EXERCISE & FITNESS

Please ✓	Exemption	Remarks
	Basic Exercise Course (BEC)	Course & Certification Examination

1. PERSONAL PARTICULARS

Name (as in NRIC/Passport):			
NRIC/Passport No:		Gender:	Male / Female
Date of Birth (dd/mm/yy):		Age:	
Address*:			
			S ()
Contact Numbers:	(Mobile*)	(Office)	(Home)
Email Address*:			

*Compulsory for communication purpose

2. RELEVANT EDUCATIONAL QUALIFICATION (Please attach copies of certificates)

Name of Institution	Qualification	From (Year)	To (Year)

3. Relevant Coaching / Fitness / Sport Experiences (Please attach documentation)

4. APPLICATION FEE - \$21.00 (inclusive of 7% GST)

5. TERMS & CONDITIONS

Payment for the application fee is required upon submission of application and is non-refundable. Notification of the application results will be forwarded to the participants within thirty (30) days of receipt of the application. The exemption is valid for a period of one (1) year from the issue date.

6. DECLARATION AND AUTHORISATION (For 21 years old and above)

I hereby apply for the exemption to the Singapore Sports Council Basic Exercise Certification Examination. I declare that the information given in this form is true and complete. I understand if falsified information is submitted, exemption will be rescinded. I will comply with all terms & conditions, rules and regulations of the Singapore Sports Council. (^Delete where applicable)

Signature Date

7. PARENT'S GUARDIAN'S CONSENT (For below 21 years old)

I, _____ NRIC No. _____
^parent/guardian of _____ hereby apply on behalf of my
^child/ward for the exemption to the Singapore Sports Council Basic Exercise Certification Examination. I declare that the information given in this form is true and complete. I understand if falsified information is submitted, exemption will be rescinded. My ^child/ward will comply with all terms & conditions, rules and regulations of the Singapore Sports Council. (^Delete where applicable)

Parent's/Guardian's Signature Date

Please return the completed form and payment to:
[For cheque payment, please made cheque payable to "**Singapore Sports Council**". For mailing, please indicate "CHEQUE ENCLOSED" on the envelope.]

Sports Industry Development Division
Address: Singapore Sports Council, 230 Stadium Boulevard, Singapore 397799
Tel: 6500 5186 **Fax:** 6346 1842 **E-Mail:** ssc_sid@ssc.gov.sg

<p>FOR OFFICIAL USE ONLY</p> <p>Payment Mode: Cash (Receipt No: _____) / Cheque (Cheque No.: _____)</p> <p>Name of officer & Signature: _____ Approve: YES / NO</p>
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