



International Personal Trainers & Fitness Academy

Branches : Singapore | Canada | China | Hong Kong | Malaysia | India | Macau

Since 1959 From Singapore

ENROLLMENT FORM

Course Code	Course Name
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Photo

Personal Information

Name :		
Date of Birth :	Identify ID./Passport No.:	
Sex :	Age:	Occupation:
Address :		
Tel No. :		Mobile :
Related work experiences and current certificates :		
Information Source: <input type="checkbox"/> Website <input type="checkbox"/> Friend Recommend <input type="checkbox"/> Post <input type="checkbox"/> Others E.g.: _____		

All the personal data will keep confidential and will only be used in the application procedure of the events organized by our Academy. For any change of your personal data, please contact IPTFA.

Payment : Cash, EPS, Cheque, and T/T, Please do inscribe: "International Personal Trainers & Fitness Academy", T/T account No.:

Declaration

I, _____, declare that all the personal data are true and correct. I am aware that my participation in the International Personal Trainers & Fitness Academy event(s) exposes me to a risk of personal injury and I agree to hold harmless International Personal Trainers & Fitness Academy, their Directors, employees and subsidiaries, the presenters and all the event staff from any and all liability arising from this course including, abut not limited to, muscle strains, tears, pulls, broken bones, death and any and all illness, ailments or loss of personal property.

I understand the risks arising from the participation of this course and attest that I am in sound physical condition. I also understand that I may be videotaped, audio taped and photographed during the course and International Personal Trainers & Fitness Academy may use my images for any and all uses without my prior consent. I further agree to all conditions of registration, including but not limited to, the no refund policy.

Signature of Candidate : _____

Date : _____

For Official Use

Amount : _____

Received Date : _____

Cash Cheque _____

Bank : _____

Issued by: _____

Refer to : _____