

**PART 6: ACKNOWLEDGEMENT
(FOR APPLICANT 21 YEARS OLD AND ABOVE)**

Medical Declaration

I declare that all the information provided above is true. I am currently not suffering from any acute ailments or diseases.

Undertaking

I shall comply with the training conditions and regulations, which include **no smoking**, and **no consumption of alcoholic drinks and drugs**. I shall also fully cooperate with the instructions and staff of Outward Bound Singapore. I also authorise the Outward Bound Singapore to disclose my personal information to its employees/agencies as it is necessary for official purposes in connection with the People's Association (including PAssion Card) Programme.

Acknowledgement of Risk & Consent

I am aware that my attendance in the Outward Bound® course involves a certain amount of risk. I understand that I will cooperate fully with the staff and diligently comply with the staff's instructions and all safety systems. I declare and confirm that I have read and fully understood all the Parts in this course registration form and I hereby accept the risk involved in the Course as disclosed in the information provided by Outward Bound Singapore. I further declare and confirm that all the information provided herein is true and ratify the Medical Declaration and Undertaking given by me.

Name of Applicant:			
Signature:		Date:	

END OF OBS COURSE REGISTRATION FORM – Thank you for your time!