THE BRIGADE PHILIPPINES
LEADERSHIP DEVELOPMENT COURSE BASIC & ADVANCED
REGISTRATION FORM

Instructions

1. Every trainee is required to complete a form each. USE BLOCK LETTERS.
2. No refund in case of cancellation but replacement will be allowed
3. Trainees below 18 years must complete the Parents/Guardians Consent Form or **Section B**.
4. The organising committee reserves the right to reject any application found not suitable and fee will be refunded in full.
5. All completed applications must reach your Captain before October 30, **2012**.

SECTION A - TRAINEE'S DETAILS

PLEASE WRITE/TYPE IN CAPITAL LETTER

NAME _____

School / Church _____

RANK ☐ Private ☐ Lance-Corporal ☐ Corporal ☐ Sergeant

Email _____ AGE ☐☐

Do you require any special medical attention? YES ☐ NO ☐ Male ☐ Female ☐

If yes, give details below

ALLERGENS & SICKNESS : _____

PROHIBITED FOOD : _____

In case of emergency, please contact

NAME _____

RELATIONSHIP ☐ Father ☐ Mother ☐ Others _____

TELEPHONE(H) ☐☐☐☐ - ☐☐☐☐☐☐☐ (OFFICE) ☐☐☐☐ - ☐☐☐☐☐☐☐
Area Code Area Code

Mobile No. ☐☐☐☐ - ☐☐☐☐☐☐☐

Course to attend

☐ LDC Basic ☐ LDC Advanced

REGISTRATION FEE

☐ P700 (before October 30, 2012) ☐ P900 (November 1, 2012 onwards)

SECTION B - PARENT'S/GUARDIAN'S CONSENT

I hereby grant permission for my child/ward _____ to participate in the Leadership Development Course (LDC) at Grace Christian College, Quezon City, Manila, Philippines on Friday, November 30, 2012 to Sunday, December 2, 2012.

I undertake not to hold The Brigade Philippines, its officials, organisers or assigns liable for any claims or loss arising as a result of any untoward incidents during the training course.

_____ _____
Signature of Parent/Guardian Date

Name : _____

Relationship : _____

SECTION C - CAPTAIN'S CONFIRMATION

I confirm that the participant _____ is a member of my company / school / church and all the particulars are true and correct.

_____ _____
Company Captain Signature Date

FOR OFFICE USE ONLY

Amount received	Receipt No.	Received by	Date

THE BRIGADE PHILIPPINES
LEADERSHIP DEVELOPMENT COURSE - BASIC & ADVANCED

Company Participants Master Name List

COMPANY: _____ **SCHOOL:** _____

a) Please submit this Master Name list to Mr Paul Tiu or Ms Melissa Amado by 1 November 2012
b) Please ensure the name is printed correctly because their names will be printed on their certificate based on this list

S/N	PARTICIPANTS NAME	COURSE	ALLERGENS	SICKNESS	PROHIBITED FOOD
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					
27					
28					
29					
30					
31					
32					
33					
34					
35					
36					
37					
38					
39					
40					

Submitted by

Name: Email address:

Mobile No: