

2024 MOE-**OBS Challenge** Programme -Course Registration Form



20 mins estimated time to complete

Instructions

1. Only a Parent/Legal Guardian of the Participant may complete this Registration Form on behalf of the Participant if the Participant is below 18 years old. The submission of a completed Registration Form by the Participant or Parent/Legal Guarqui of the Participant indicates your interest

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Instructions

- 1. Only a Parent/Legal Guardian of the Participant may complete this Registration Form on behalf of the Participant if the Participant is below 18 years old. The submission of a completed Registration Form by the Participant or Parent/Legal Guardian of the Participant indicates your interest to enrol the Participant into the MOE-OBS Course (the "Course").
- 2. Medical recommendation of fitness by a "physician" is required. A "physician" refers to a medical practitioner registered under the Medical Registration Act (Chapter 174). MOE-OBS will review the application the Course's programme intensity ar operational considerations. MOE-OF Vaccination status is required reserve the right to reject applicatio and can be checked through assessed not suitable at this time.

Student's **Tetanus**

this link

3. The information you shall provide is taken as complete, true and accurate to the best of your knowledge, and you are taken to have read the "Important Note" provided at https://go.gov.sg/moeobs-importantnotes and to have understood the Course participation requirements, including permission to administer over-the-coun ? medication and specified non-over-the-

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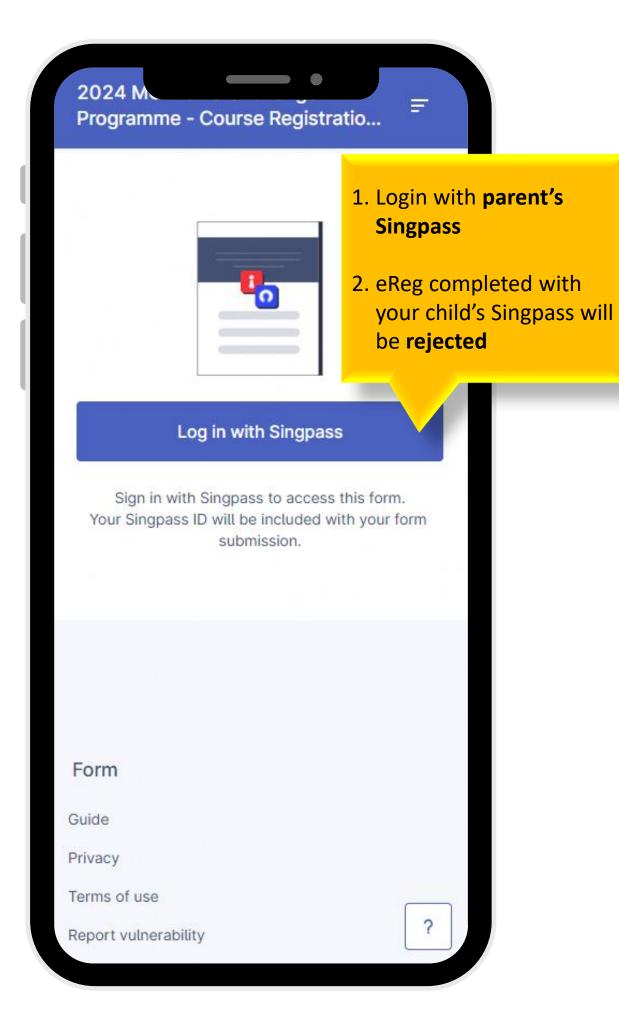
medication and specified non-over-thecounter medications to the Participant if necessary.

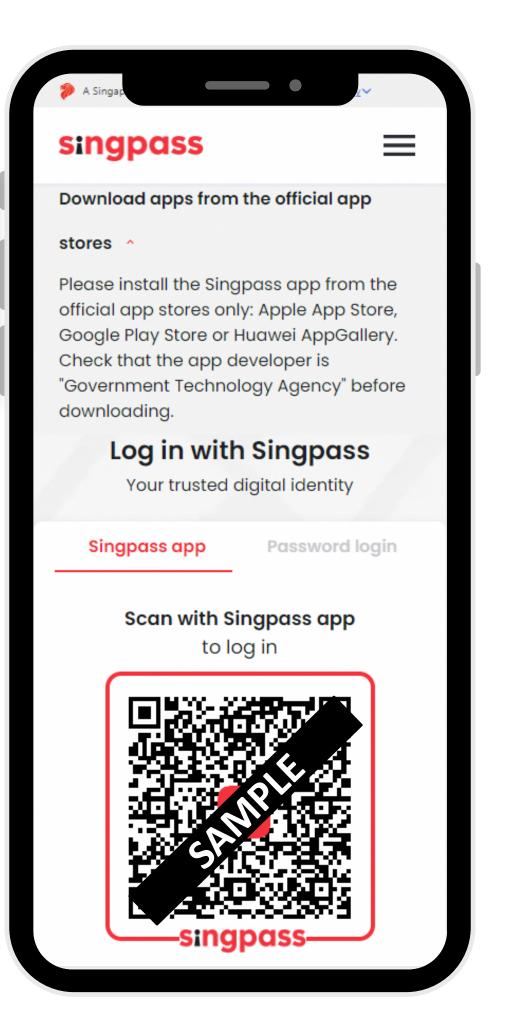
- 4. It is a requirement to notify MOE-OBS if the Participant's health information changes as a result of contracting any illness or sustaining any injury between submission of the Registration Form and the start of the Course. If necessary, MOE-OBS may request for re-assessment/consult with a physician.
- 5. You will need the following information to complete the Registration Form:
- i. The Participant's personal details including Emergency Next-of-Kin contact details:
- ii. The Participant's latest health information and valid tetanus vaccination (within 10 years of Course date). Check the date of the Participant's Tetanus vaccination(s) at

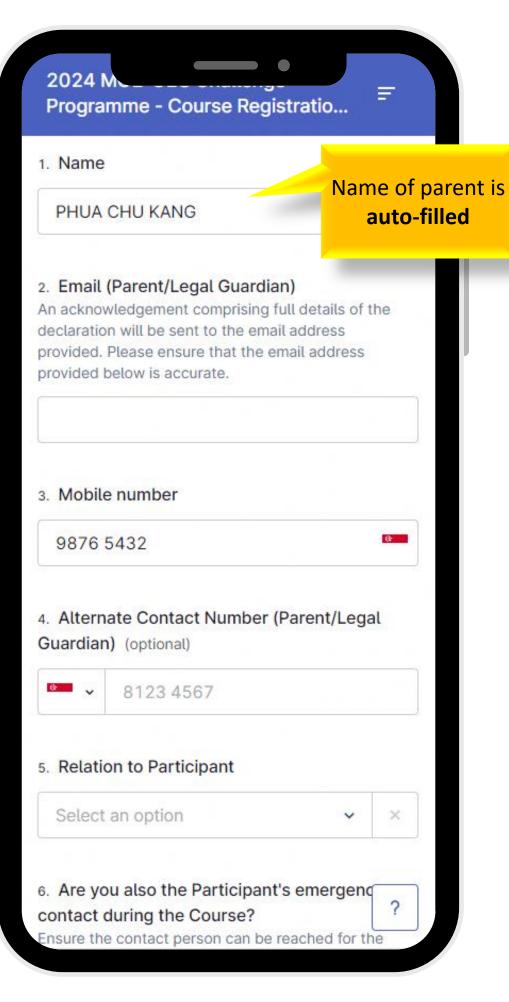
https://www.nir.hpb.gov.sg/nirp/eservices/lo gin [2

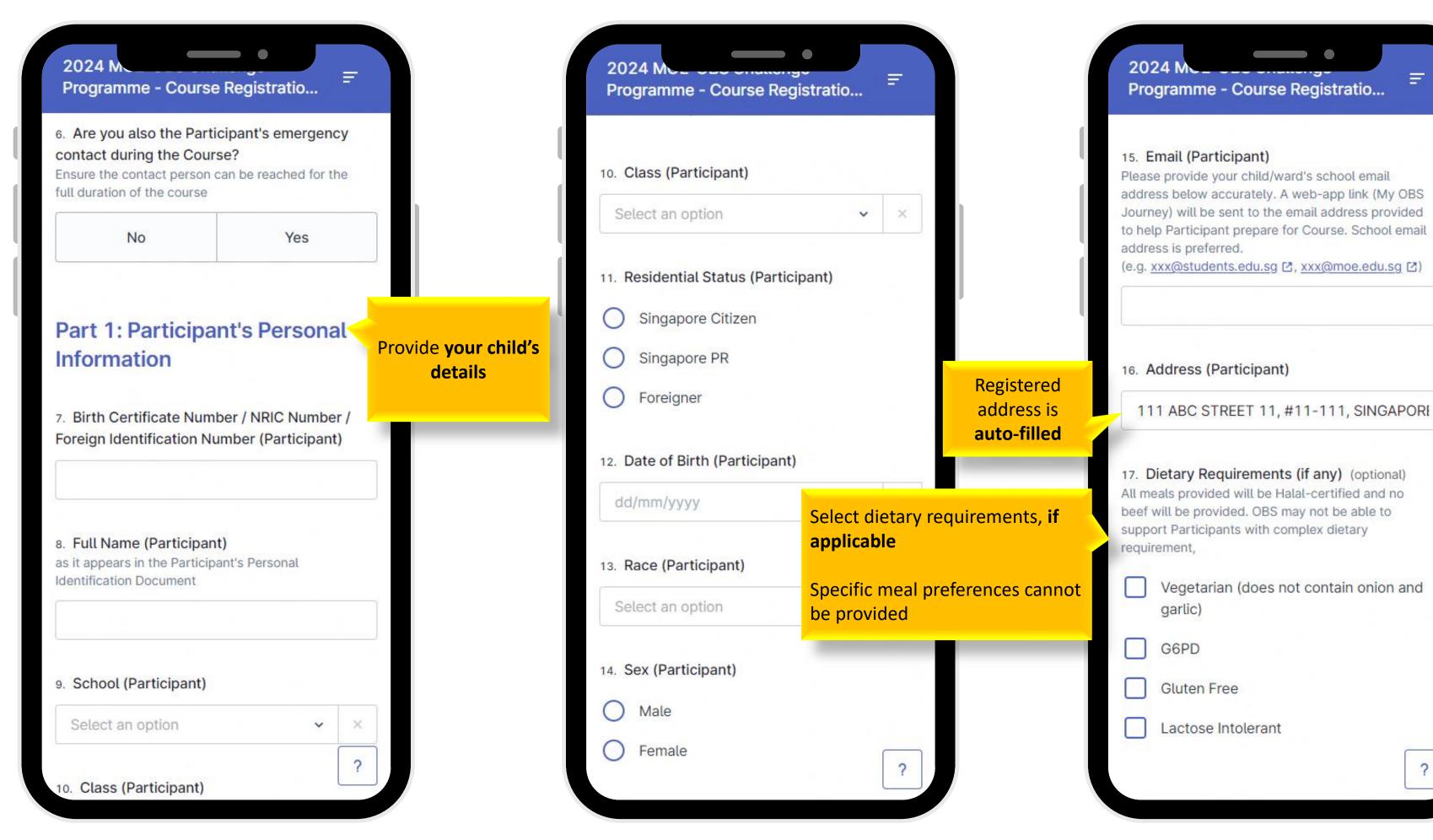
(immunisation records are only available for children born in or after 1996).

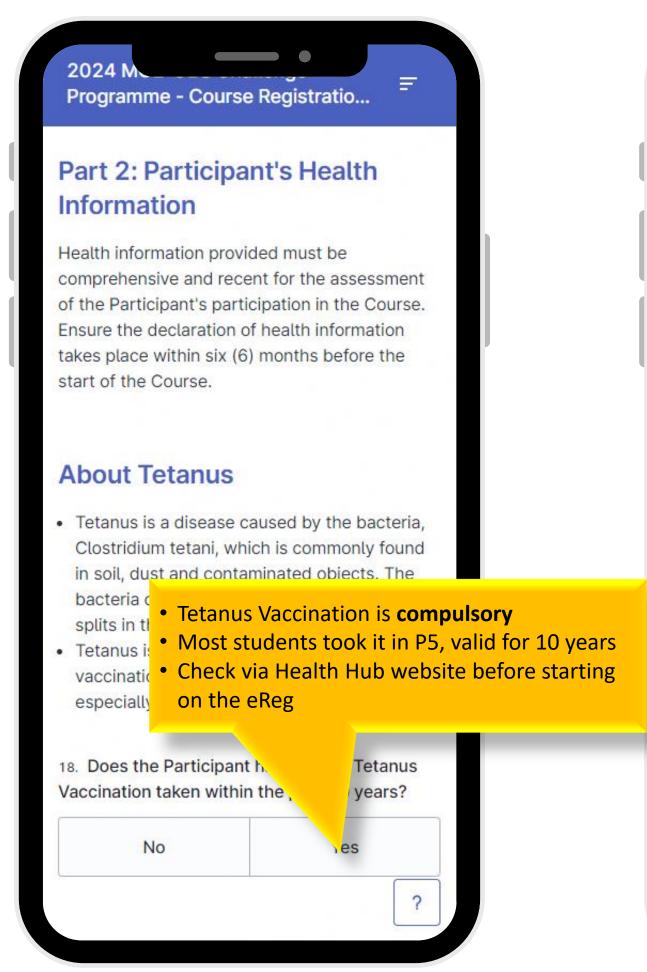
iii. Supplementary information is required for Participants with any pre-existing medical / psychological / behavioural conditions currently on follow-up.

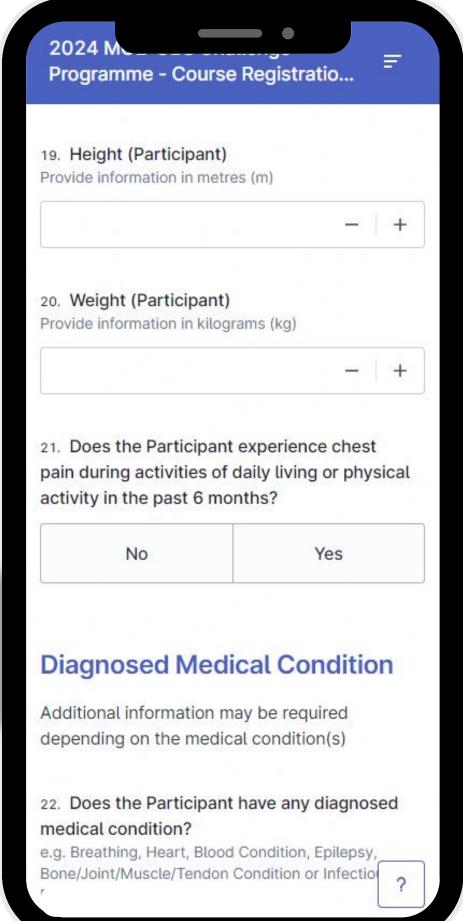


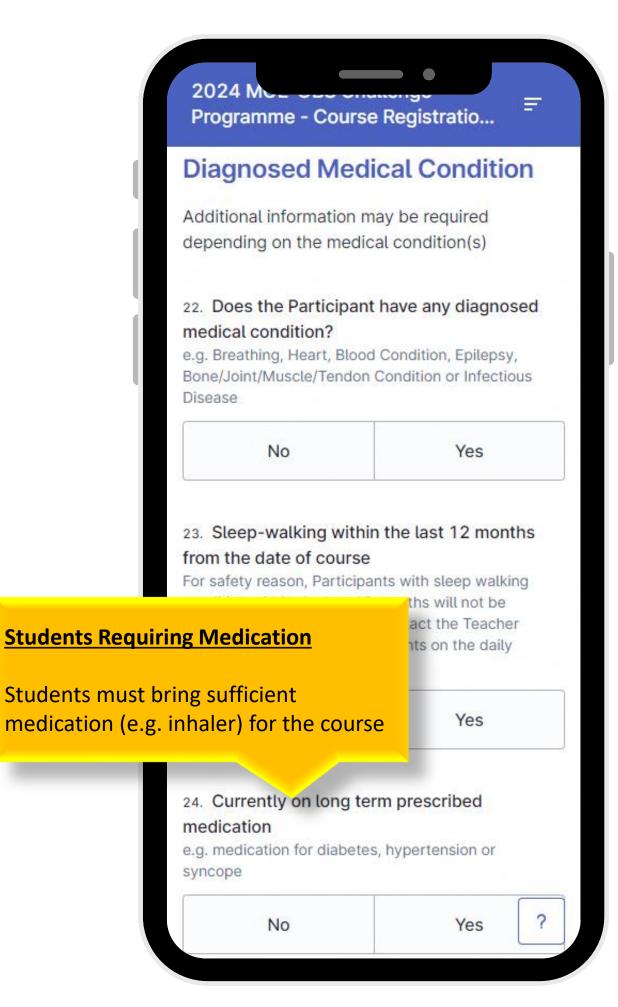


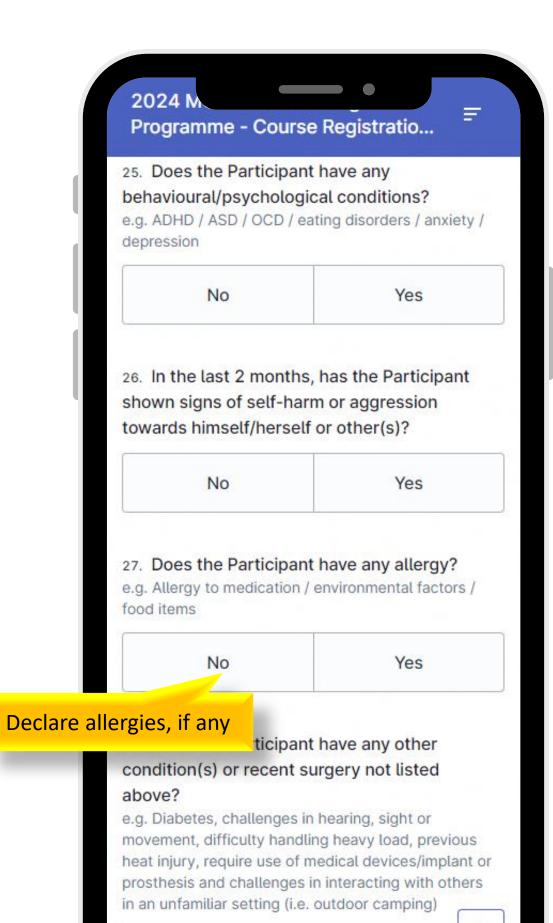












No

Yes

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Part 3: Declaration, Acknowledgement & Consent

29. General Declaration, Acknowledgement & Consent

- a) I declare and confirm that all the information provided is complete, true and accurate to the best of my knowledge, and there is no undisclosed information that would affect the Participant's suitability to participate in the Course.
- b) I understand all information will remain confidential and agree that MOE-OBS may obtain additional information from the Participant's school/ organisation (if applicable) to ensure safe participation and if necessary, disclose the condition to the peers in the group if MOE-OBS consider it necessary for the purpose of safe peer and/or group management.
- c) I acknowledge that additional medical information may be required for enrolment into the Course and agree to be responsible for any charges associated.
- d) I agree to promptly inform MOE-OBS of any change in the information provided.
- e) I acknowledge that the Course involves different frequency of meal times and activities such as, but are not limited to: land- and/or sea-based component(s) such as kayaking/rowing/sailing in sea/reservoir/waterbody, trekking with load on uneven terrain, traversing at heights on high rope

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- e) I acknowledge that the Course involves different frequency of meal times and activities such as, but are not limited to: land- and/or sea-based component(s) such as kayaking/rowing/sailing in the sea/reservoir/waterbody, trekking with load on uneven terrain, traversing at heights on high rope courses and camping outdoors in tents. These activities may be conducted in all weather conditions, over prolonged duration in the day.
- f) I give permission for MOE-OBS to administer any medical treatment that MOE-OBS deems necessary to maintain the Participant's well-being during the Course. I also give permission for MOE-OBS to seek medical treatment and care as may be necessary for the Participant and for this purpose, to disclose information that MOE-OBS deem necessary to authorised medical personnel to provide the Participant with appropriate treatment.
- g) I acknowledge that access to emergency medical services on mainland Singapore is subject to delay, depending on the location of the Participant, the nature of the terrain, prevailing weather conditions and other factors beyond OBS's control, at times by up to 2 hours (this is an estimated timing as there could be factors beyond OBS's control that may increase the timing).
- h) I acknowledge that the Course involves inherent risks that can result in loss, damage, accident and/or injury, and necessary precautions are in place to ensure the safety and security of participants but complete elimination of risks is not possible given the nature and outdoor environment of the Course.
- I acknowledge that necessary precautions are

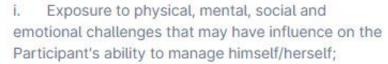
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- i) I acknowledge that necessary precautions are in place to ensure the safety and well-being of the Participant and I will not hold MOE-OBS, its officers, employees and agents liable for any loss or damage incurred or suffered arising from or in connection with participation in the Course to the extent permitted by law, provided that the same is not caused by the gross negligence or wilful act or omission of MOE-OBS or its officers, employees and agents.
- j) I declare and confirm that the Participant has read and understood the instructions to:
- inform MOE-OBS if the Participant does not wish to participate in any component of the Course before the commencement of such components;
- ii. cooperate fully with MOE-OBS and diligently comply with their instructions and all procedures at all times, including but not limited to safety systems and processes; and
- iii. inform MOE-OBS if the Participant feels unwell at any time during the Course.
- k) I acknowledge that MOE-OBS reserves the right to limit or withdraw the Participant's admission to the Course at any time.

If I have declared that the Participant has any behavioural/psychological condition(s), I understand and accept that given the Participant's condition, and the nature of the Course, participation may involve additional risks arising from:

i. Exposure to physical, mental, social and emotional challenges that may have influence or Participant's ability to manage himself/herself:

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- ii. Group supervision which requires the Participant to be able to understand and follow safety instructions and procedures without individualised attention by the OBS Group Instructor:
- iii. Possible adverse reaction of the Participant to the Course and/or peers in the same group due to the condition; and
- iv. Access to emergency medical services and/or special management of triggered condition on mainland Singapore being delayed depending on the location of the Participant, the nature of the terrain, prevailing weather conditions and other factors beyond OBS' control, at times by up to 2 hours (please note that 2 hours is an estimated timing as there could be factors beyond OBS's control that may increase the timing).
- I understand and accept the above and that safety procedures are in place to minimise risks, but complete elimination of these risks is not possible in the outdoor environment.
- m) I acknowledge that participation in the MOE-OBS Course is voluntary.
- n) I give consent to MOE-OBS to disclose the Participant's condition to the peers in the group if OBS consider it necessary for the purpose of safe peer and/or group management.

If I have declared that the Participant has a sensitivity to medication, environmental and/o

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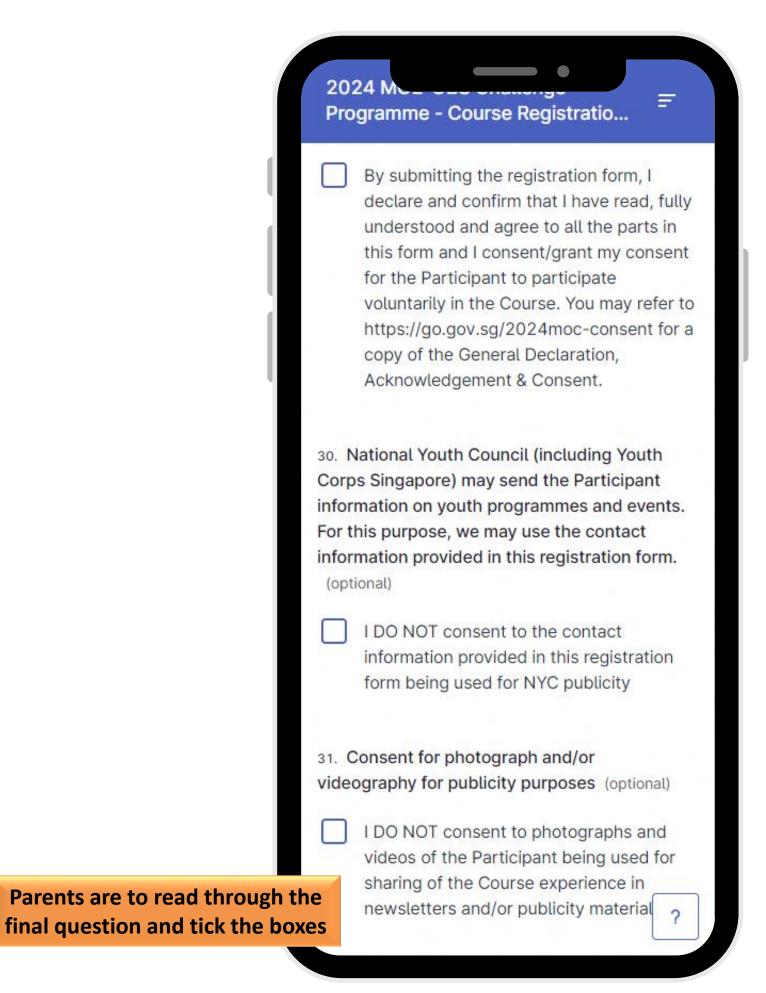
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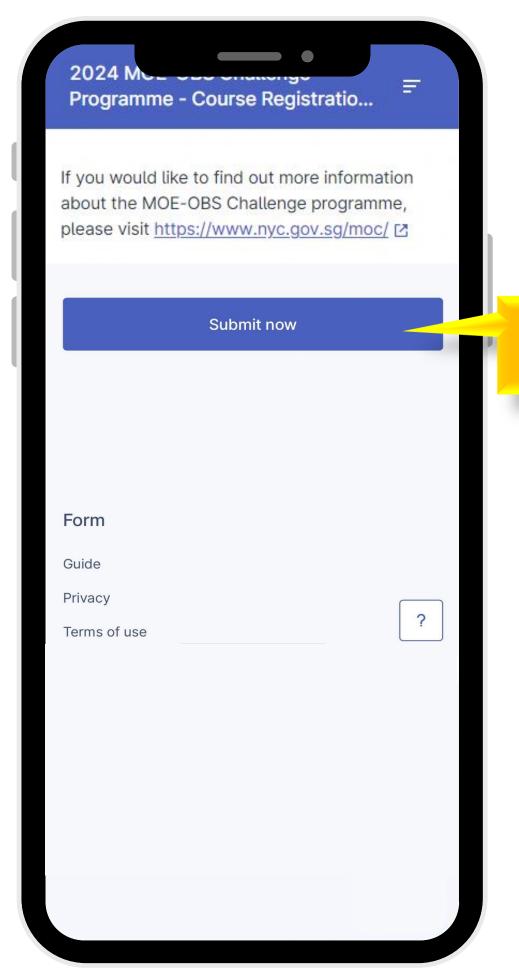
If I have declared that the Participant has a sensitivity to medication, environmental and/or food allergen(s), I understand and accept that given the level of the Participant's sensitivity to allergen(s), the Participant's ability to manage the condition, and OBS's limited ability to control the Participant's contact with either known or unknown allergens:

o) I acknowledge the risks of, and agree to, the Participant's participation in the Course where access to emergency medical services could be up to 2 hours away. (I note that 2 hours is an estimated timing as there could be factors beyond OBS' control that may increase the timing.)

Consent for Collection, Use and/or Disclosure of Personal Data For Course-related Purposes

- p) The Participant's personal information, including any photographs and videos of the Participant during the Course, will be used for Course-related purposes. I also understand and agree that, where appropriate, necessary information may be shared with other government/public agencies, so as to improve the discharge of public functions and to serve me in the most efficient and effective way, unless such sharing is prohibited by law.
- q) OBS may send the Participant information related to the Participant's Course experience. For this purpose, we may use the contact information provided in this registration form or any other contact information separately provided by the Participant.





Click the **'submit now'** button to ensure the eReg is submitted