



DC NO.: _____
 Charity Walkathon World Sight Day
 26th November 2017
 Taman Haji Sir Muda Omar 'Ali Saifuddin

REGISTRATION FORM

NAME OF PARTICIPANT

I.C. OR PASSPORT NUMBER

COLOUR

GENDER

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DATE OF BIRTH

AGE

NATIONALITY

TELEPHONE/MOBILE NUMBER

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EMAIL ADDRESS

BLOOD GROUP

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MAILING ADDRESS

EMERGENCY CONTACT PERSON

EMERGENCY CONTACT NUMBER

RELATIONSHIP OF CONTACT PERSON

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CATEGORY

CODE	CATEGORY	DISTANCE	FEE
A	WALKATHON (OPEN)	3.5 KM	\$25

SHIRT SIZE

Please circle your shirt size:

| 32 | 34 | 2XS | XS | S | M | L | XL | 2XL |

Other: _____

Sizes	32	34	2XS	XS	S	M	L	XL	2XL
Shoulder	15	16	16	17	18	19	20	21	21.5
Armhole	15	16	16.5	18	18	19	20	20	23
Sleeve Length	6	6.15	7	7.5	8	9	9.5	10	10.5
B. Width	32	34	36	38	40	42	44	46	48
B. Length	23	24	26	27	28	29	30	31	31.5



RULES AND REGULATIONS

1. Participants are required to present the payment receipt and donation card to collect their kits.
2. The decision of the organising committees is final in accepting entries. No refund will be made for wrongful or multiple entries. Incomplete entry forms will not be accepted.
3. ELIGIBILITY – The walkathon is open for all ages. Children under the age of 12 should be accompanied by a parent or a guardian during the event.
4. The organiser has the right to modify or substitute any of the rules and regulations of the event from time to time as they deem fit.
5. If there is ambiguity in any of the provisions, the organiser shall be the authority to interpret and in doing so, the organiser will take into account of interests of all the affected participants.
6. Any update regarding the event will be notified on the official website www.bdnab.org
7. If the event has to be cancelled i.e. due to occurrence of incident that is beyond the control of the organiser and which renders it impossible or unsafe to hold the event, there shall be no refund of fees unless the organiser deems fit to give a refund and the organiser shall not be liable for any other loss or inconvenience caused due to such changes.

I have read, understood and agreed to the terms and conditions.

DECLARATION

I certify that I am entering the event at my own risk and shall not hold the organisers responsible for any injury, accident or death however caused, during or after the event.

SIGNATURE OF PARTICIPANT:

SIGNATURE OF PARENT / GUARDIAN:

DATE:

(for participant under the age of 18)

Submit the registration form and make payment at:

1. BDNAB's Office, Unit 6-07, Sixth Floor, Plaza Athirah, Jalan Kubah Makam Diraja, Batu Satu

From 25th September 2017 – 13th October 2017 (except Saturday and Sunday)

Monday – Thursday: 8.00 AM – 12.00 PM and 1.30 PM – 4.30 PM

Friday: 8.00 AM – 11.30 AM and 2.00 PM – 5.00 PM

From 16th October 2017 – 31st October 2017 (except Saturday and Sunday)

Monday – Thursday: 12.00 PM – 7.00 PM

Friday: 2.00 PM – 7.00 PM

FOR ANY ENQUIRIES, CALL +673 2222056 / +673 7145391