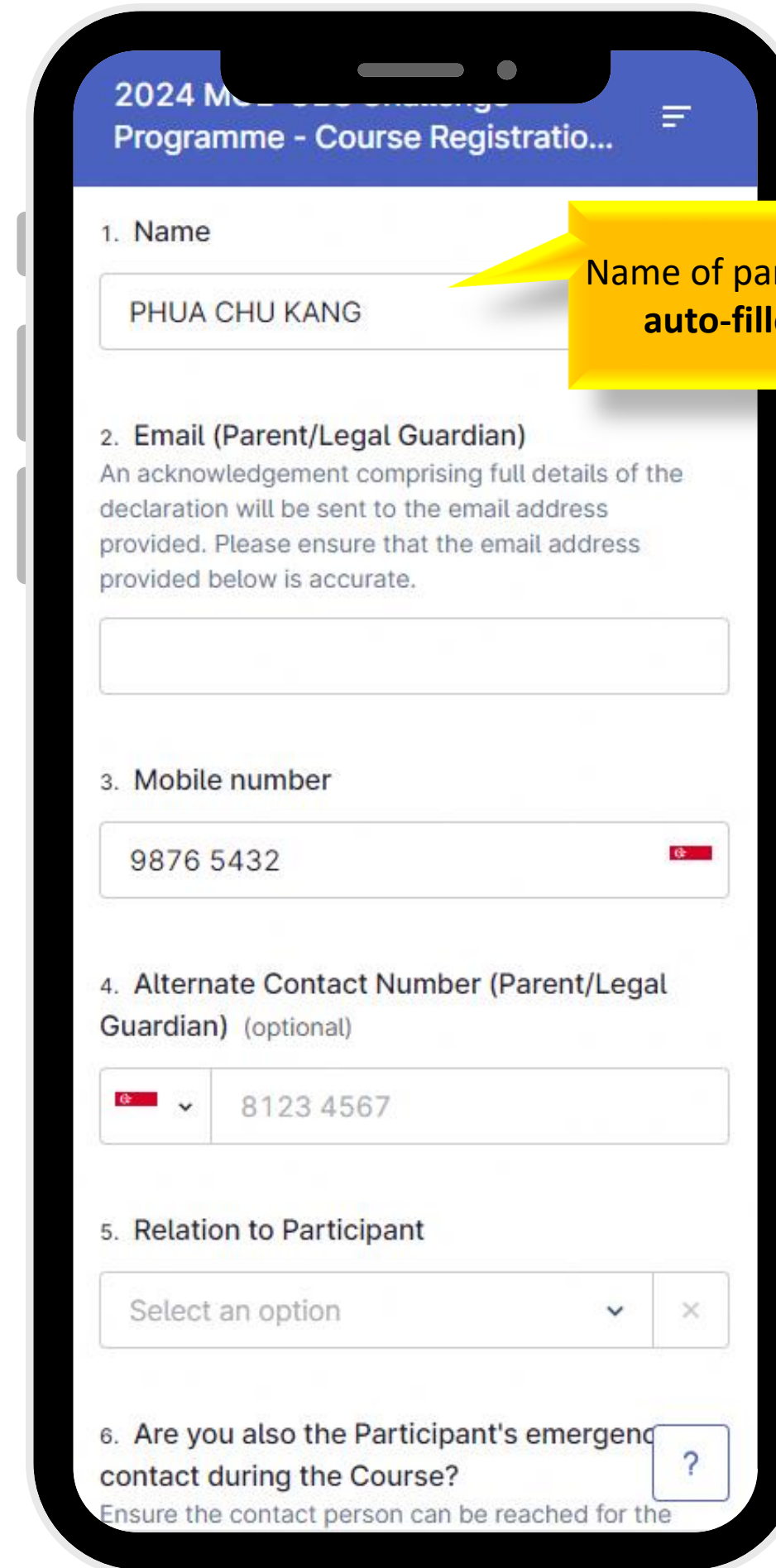
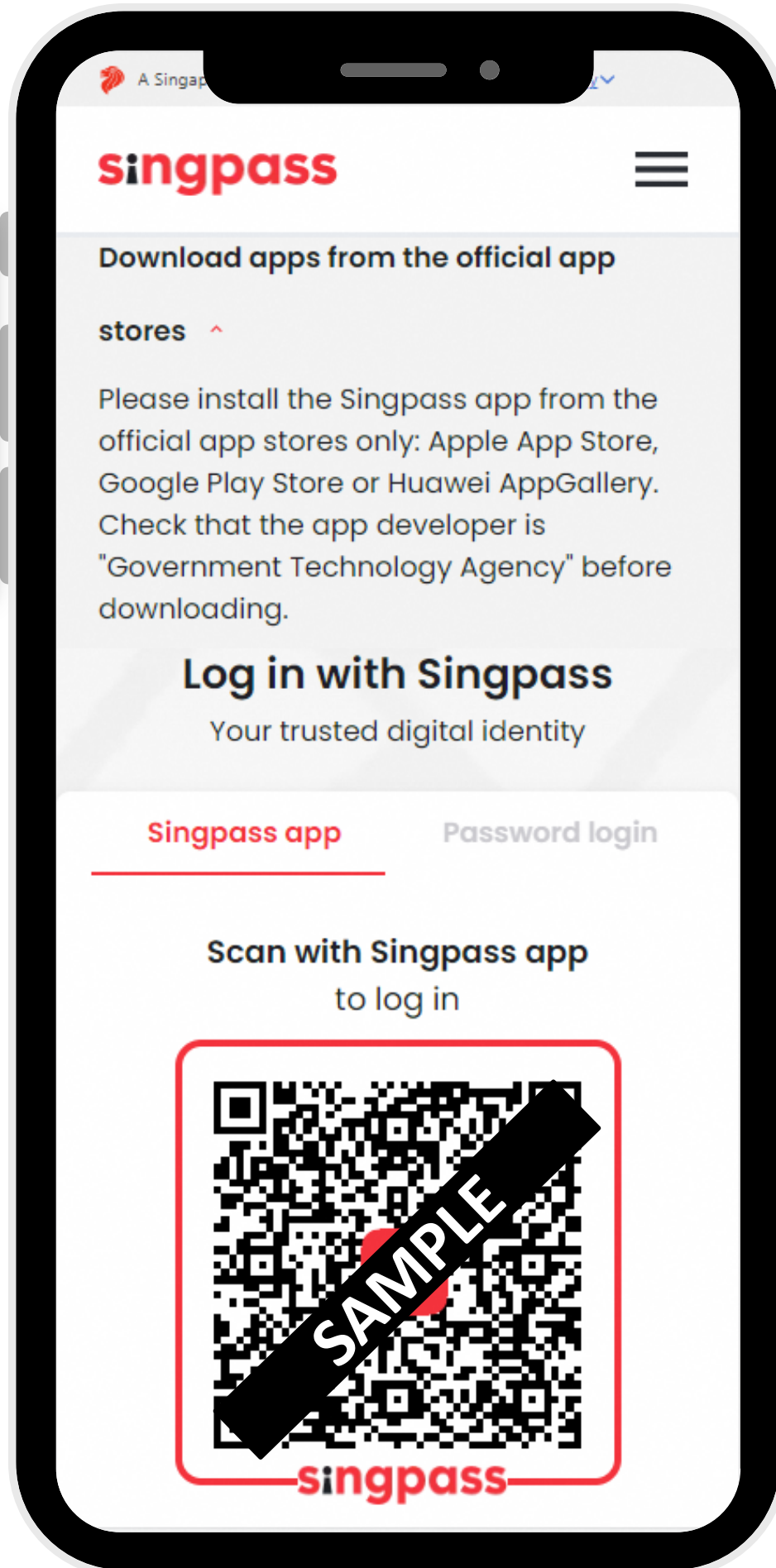
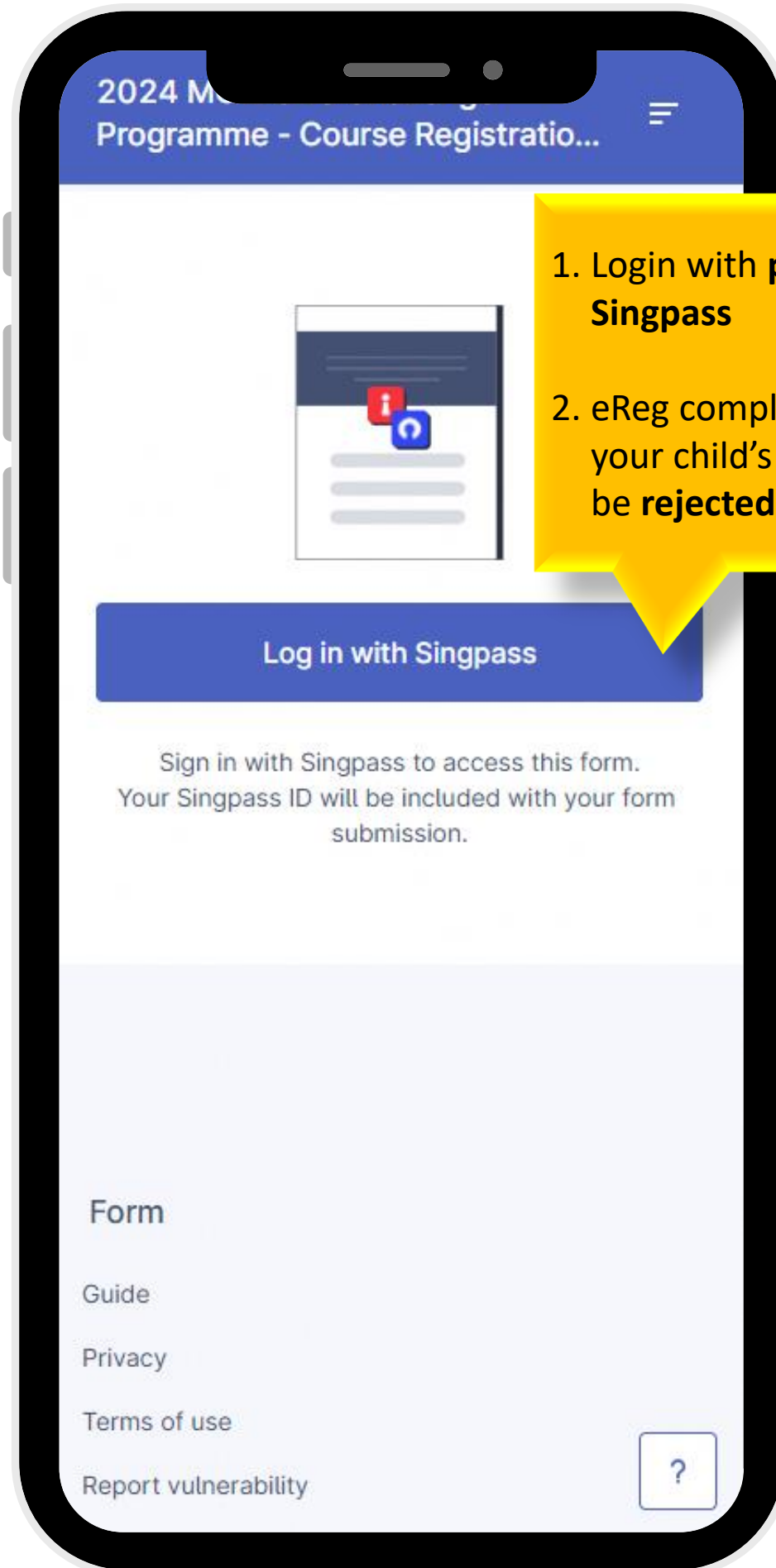


**Student's Tetanus Vaccination status is required and can be checked through this link**



2024 M... Programme - Course Registratio...

6. Are you also the Participant's emergency contact during the Course?  
Ensure the contact person can be reached for the full duration of the course

No Yes

**Part 1: Participant's Personal Information**

7. Birth Certificate Number / NRIC Number / Foreign Identification Number (Participant)

8. Full Name (Participant)  
as it appears in the Participant's Personal Identification Document

9. School (Participant)

10. Class (Participant)

Provide your child's details

2024 M... Programme - Course Registratio...

10. Class (Participant)

Select an option

11. Residential Status (Participant)

Singapore Citizen  
 Singapore PR  
 Foreigner

12. Date of Birth (Participant)

dd/mm/yyyy

13. Race (Participant)

Select an option

14. Sex (Participant)

Male  
 Female

Select dietary requirements, if applicable

Specific meal preferences cannot be provided

Registered address is auto-filled

2024 M... Programme - Course Registratio...

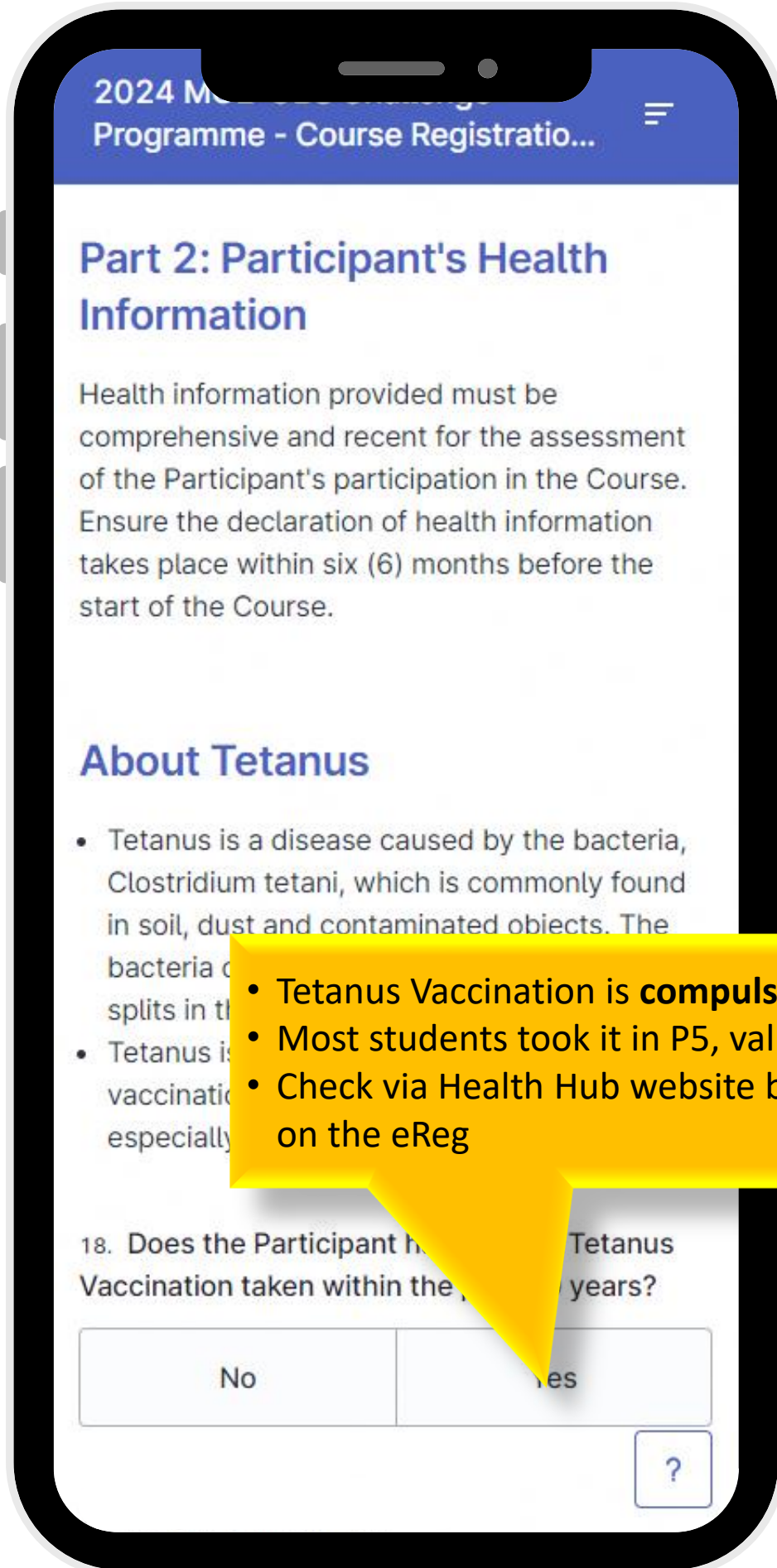
15. Email (Participant)  
Please provide your child/ward's school email address below accurately. A web-app link (My OBS Journey) will be sent to the email address provided to help Participant prepare for Course. School email address is preferred.  
(e.g. xxx@students.edu.sg, xxx@moe.edu.sg)

16. Address (Participant)

111 ABC STREET 11, #11-111, SINGAPORI

17. Dietary Requirements (if any) (optional)  
All meals provided will be Halal-certified and no beef will be provided. OBS may not be able to support Participants with complex dietary requirement,

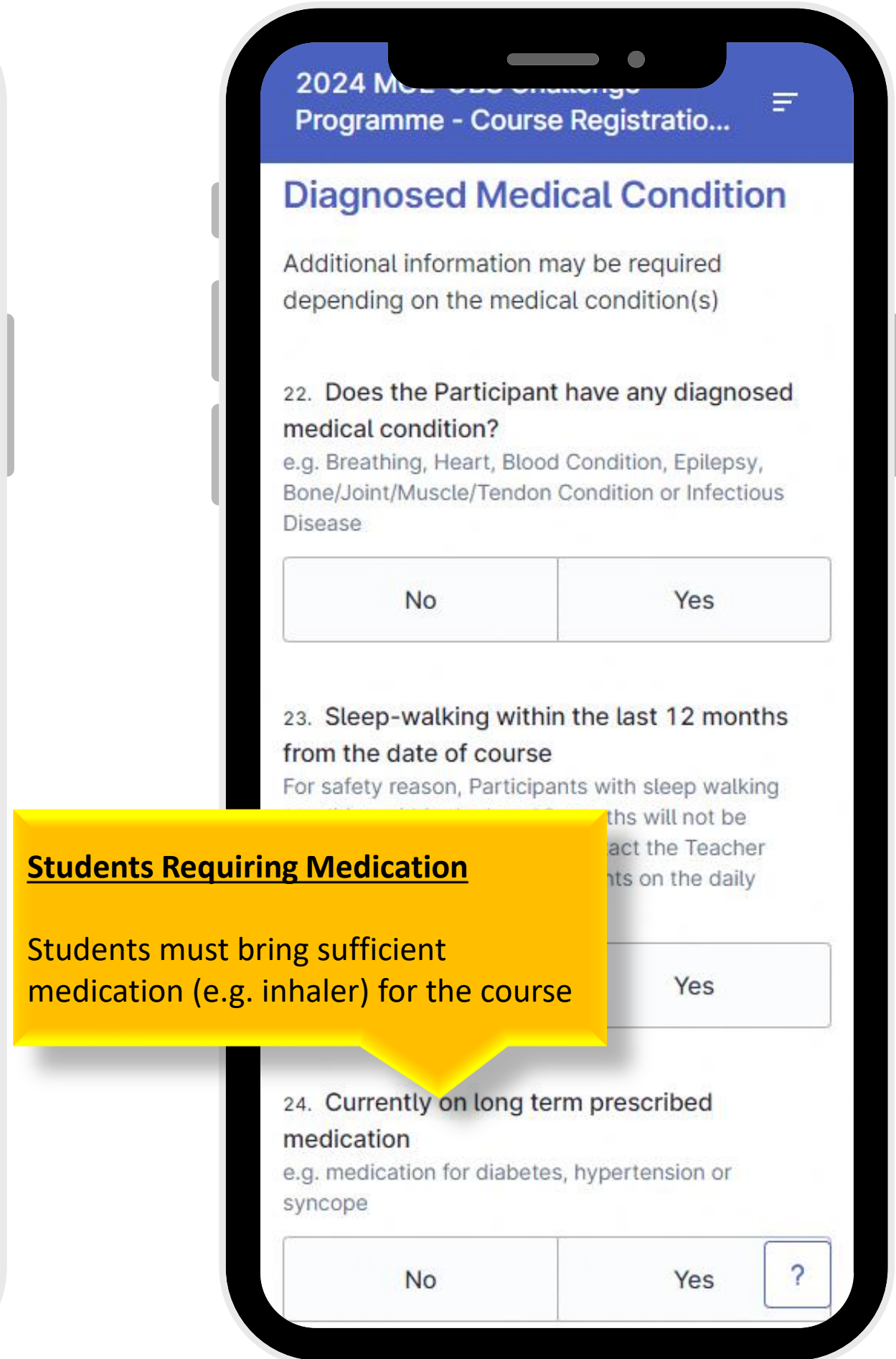
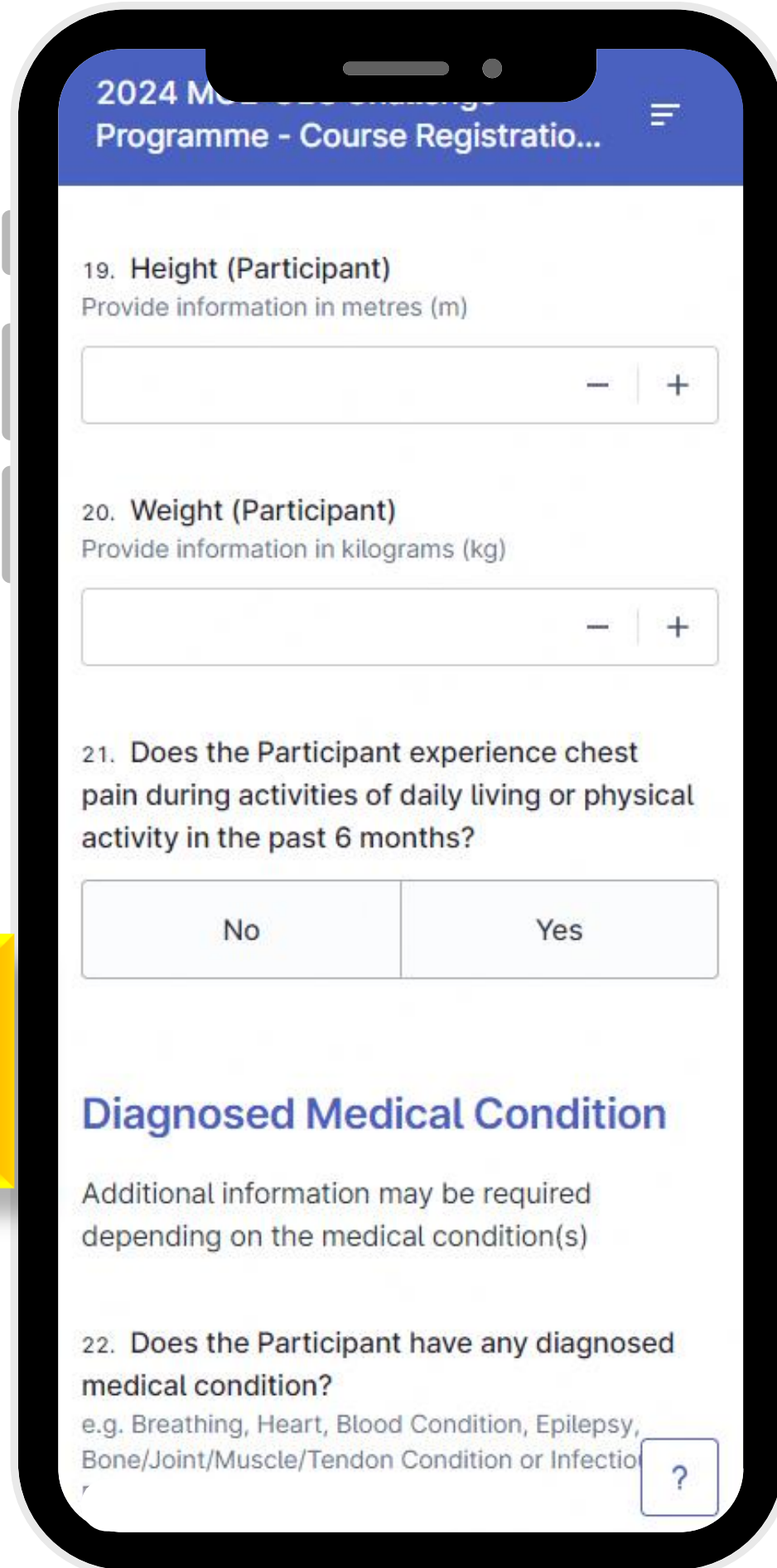
Vegetarian (does not contain onion and garlic)  
 G6PD  
 Gluten Free  
 Lactose Intolerant



• Tetanus Vaccination is **compulsory**

• Most students took it in P5, valid for 10 years

• Check via Health Hub website before starting on the eReg



**Students Requiring Medication**

Students must bring sufficient medication (e.g. inhaler) for the course

2024 M...  
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25. Does the Participant have any behavioural/psychological conditions?  
e.g. ADHD / ASD / OCD / eating disorders / anxiety / depression

No Yes

26. In the last 2 months, has the Participant shown signs of self-harm or aggression towards himself/herself or other(s)?

No Yes

27. Does the Participant have any allergy?  
e.g. Allergy to medication / environmental factors / food items

No Yes

28. Does the Participant have any other condition(s) or recent surgery not listed above?  
e.g. Diabetes, challenges in hearing, sight or movement, difficulty handling heavy load, previous heat injury, require use of medical devices/implant or prosthesis and challenges in interacting with others in an unfamiliar setting (i.e. outdoor camping)

No Yes ?

Declare allergies, if any

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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

?

2024 M...  
Programme - Course Registratio...

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.

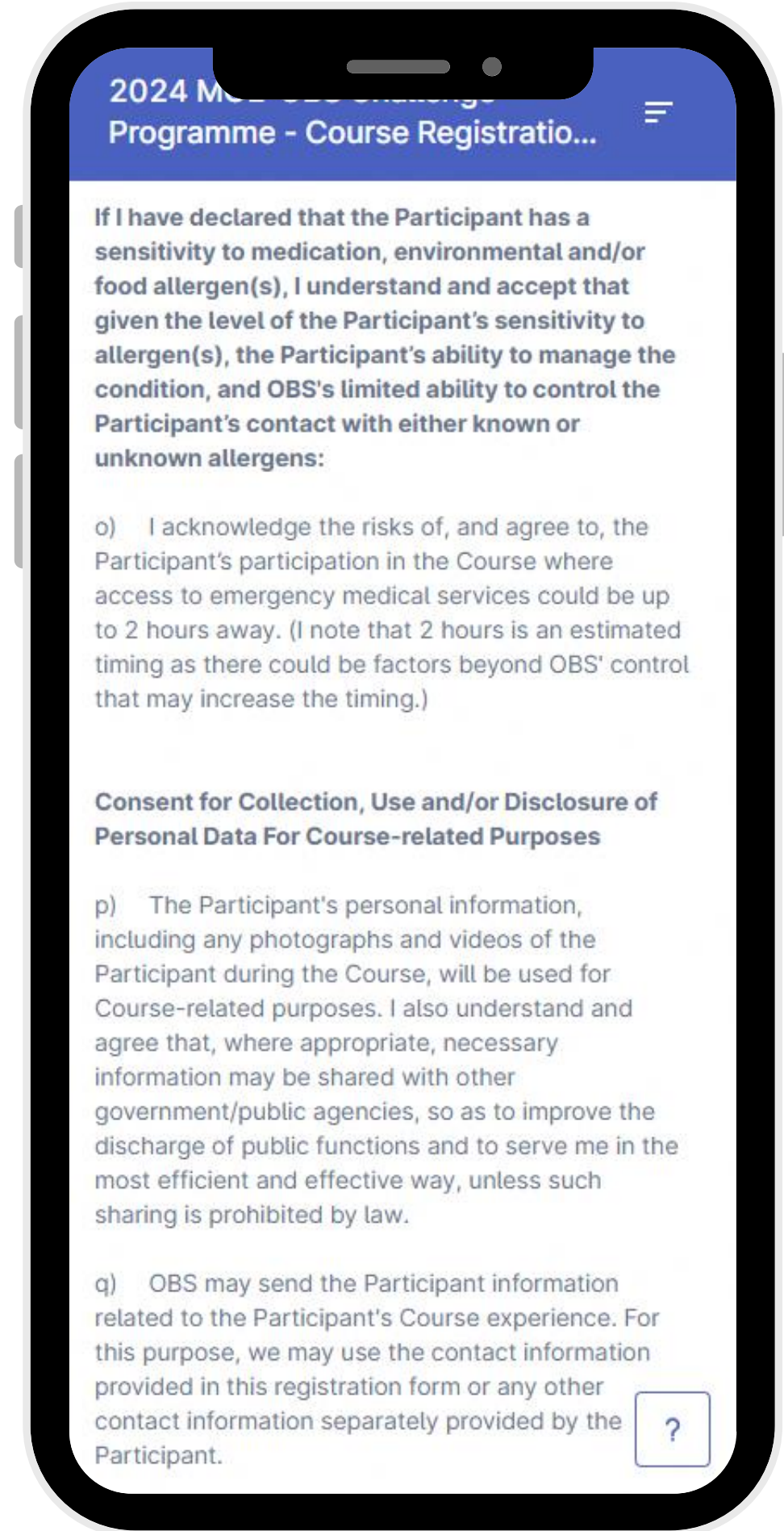
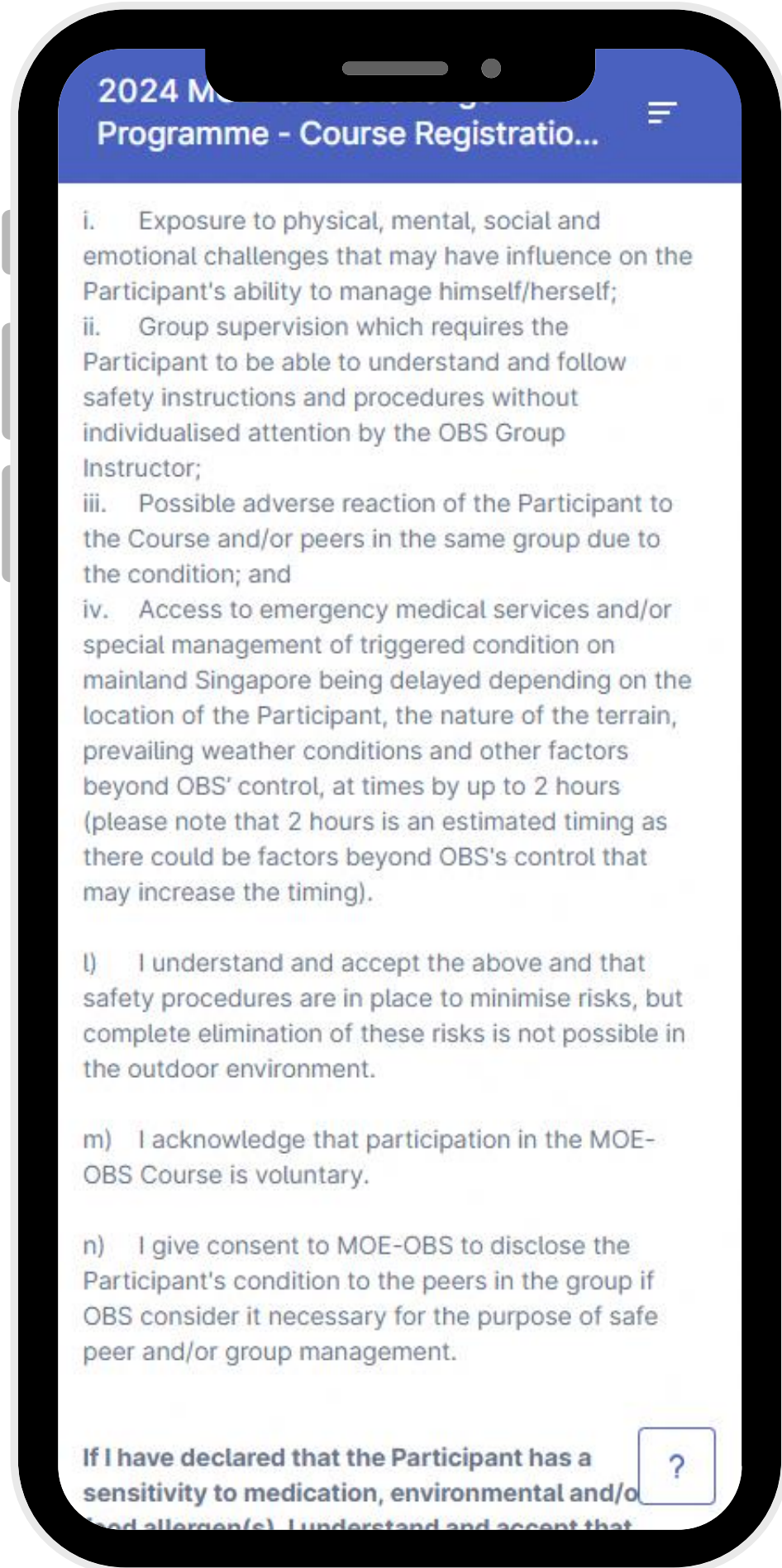
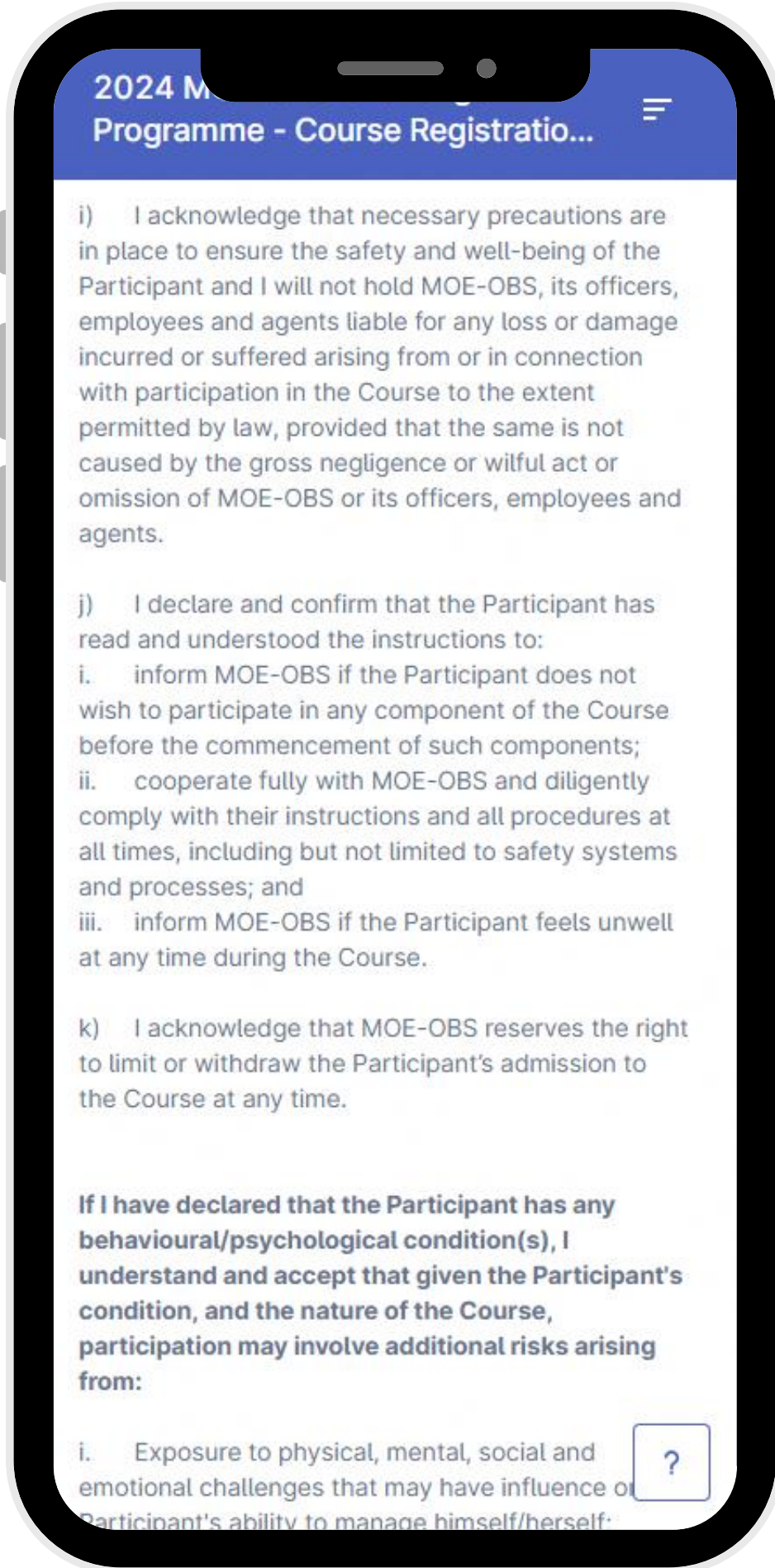
f) I give permission for MOE-OBS to administer any medical treatment that MOE-OBS deems necessary to maintain the Participant's well-being during the Course. I also give permission for MOE-OBS to seek medical treatment and care as may be necessary for the Participant and for this purpose, to disclose information that MOE-OBS deem necessary to authorised medical personnel to provide the Participant with appropriate treatment.

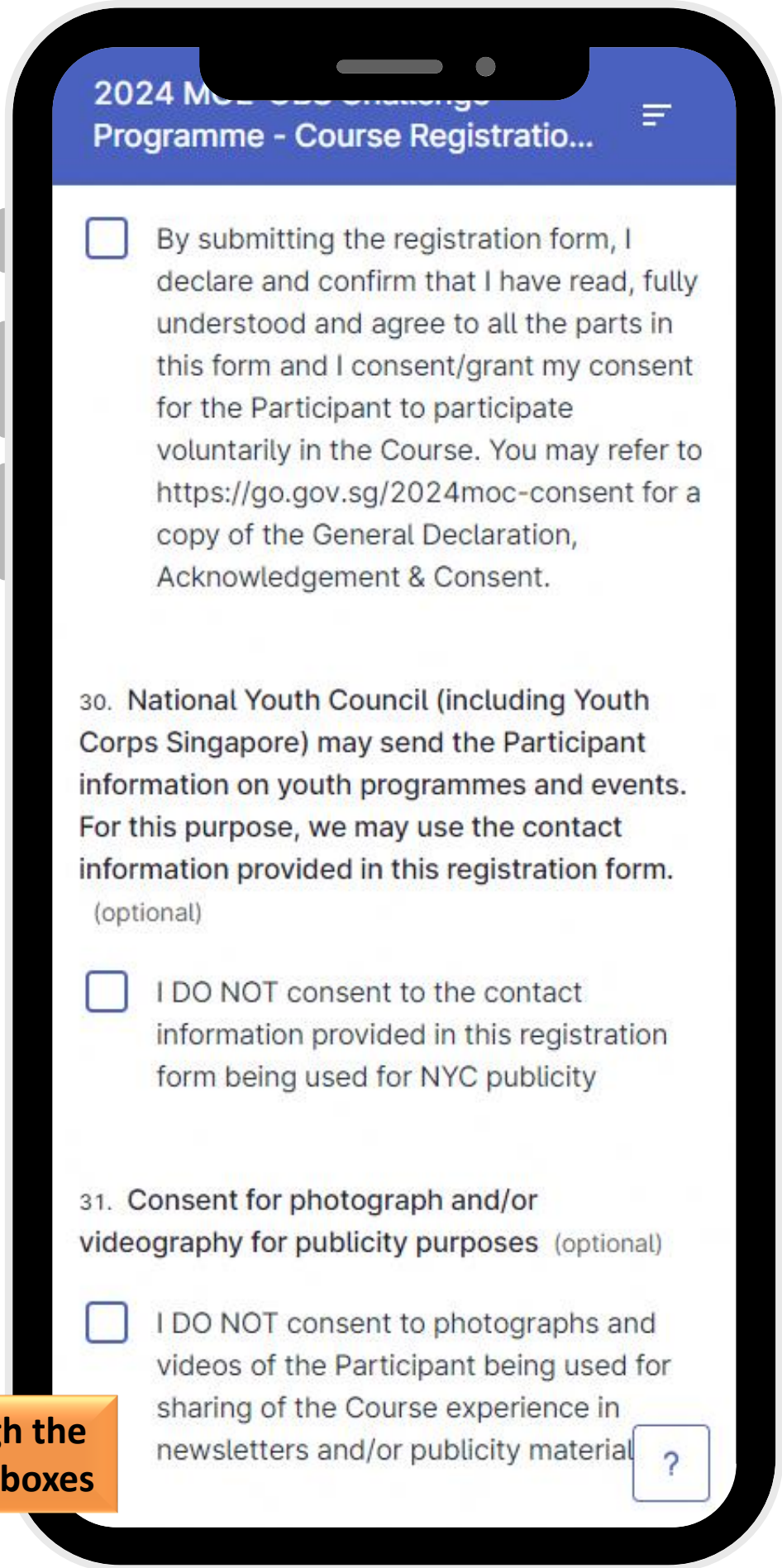
g) I acknowledge that access to emergency medical services on mainland Singapore is subject to delay, depending on the location of the Participant, the nature of the terrain, prevailing weather conditions and other factors beyond OBS's control, at times by up to 2 hours (this is an estimated timing as 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.

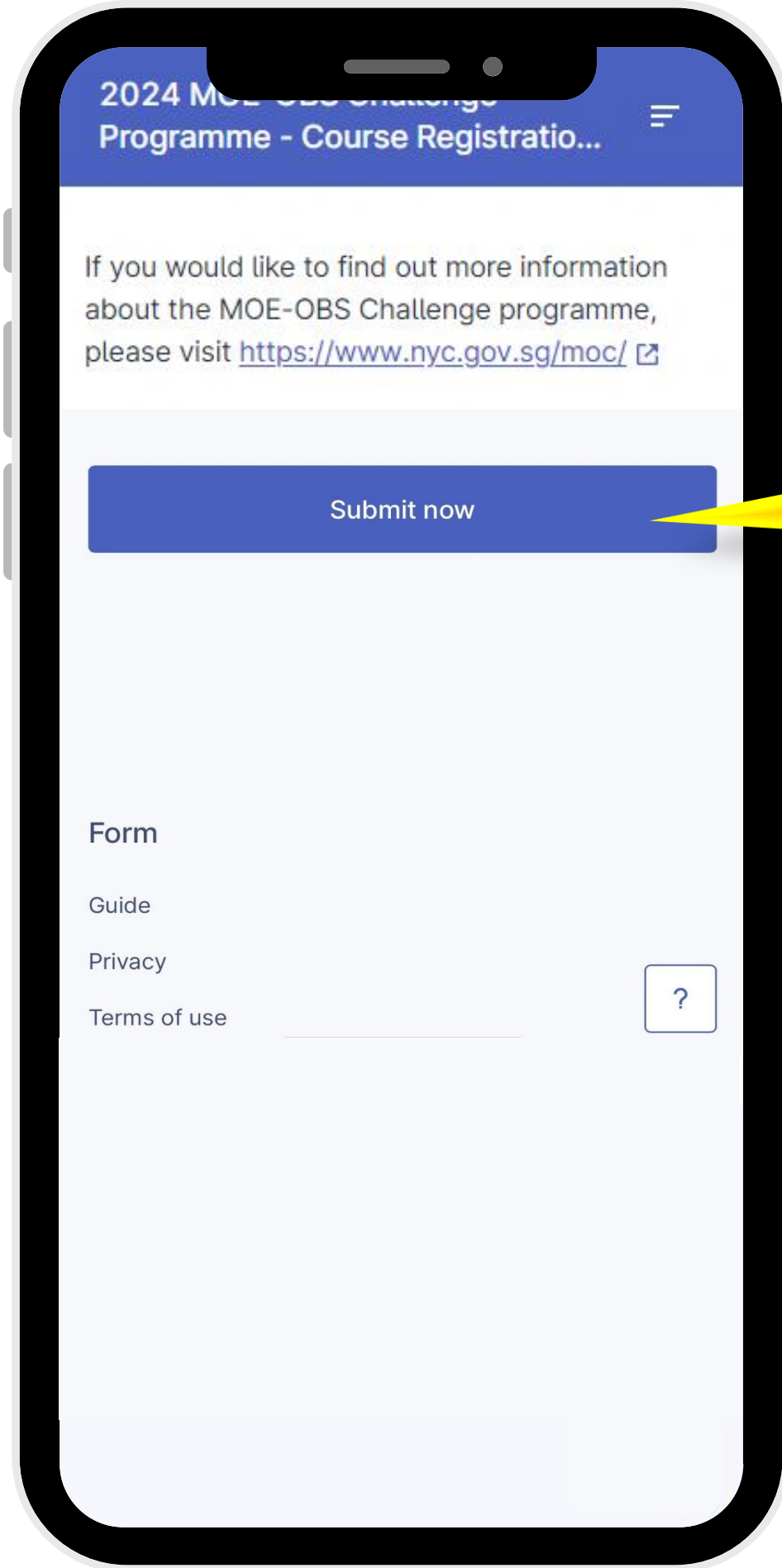
?

i) I acknowledge that necessary precautions are





Parents are to read through the final question and tick the boxes



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