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**Application Form**

Please return this form by email **no later than 30 September 2016** to:

Dato’ Jeyadhevi Subramaniam

Branch Commissioner

Girl Guides Association Malaysia

Email: jeyadhevi@gmail.com Tel: +6 019 6535 719

**Name of National Organization**: ………………….………..………….…………………………..

Name (Please underline surname): ..................……….............................………………………

Date of Birth: ................................. Age: ..........……

Passport Number: ………………….… Expiry date of passport: ………………….

Address: ..................................................................................................................................................

……………………………………………………………………...…………………………………

Telephone: ........…................…............... Fax: ……………….......…................….……………

E-mail: ......………..............................................................................................………………...

Position in Girl Guiding/Scouting: ......……................................................................................

Contact person in emergency:

• Name: ..................………........................................................................……………………

• Relationship: .….............….........………. • Tel ........................................…….........

• Fax .........…...............................………… • E-mail ...................................………….

Religion: .....…..........……..................................................................................………………..

Diet requirements: .….....……...........................................................................…………………

Allergic to: .…............................................................................................………......................

Any medical treatment at present: ….........................................................……………………...

Any long term or previous injury that may re-occur during the Event:

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Height: ....…....….............cm Weight: ..….….…........................kg

Chest size: ..……...……. cm (for T-shirt) Blood type: ..……........................

**TShirt Size S /M /L /XL /2XL /3XL /4XL /5XL (circle)**

***If you are 19 years or under, please ask a parent/guardian to sign the following:***

I consent to my child taking part in outdoor activities and I acknowledge that as a result of those risks, injuries may be sustained from time to time. I agree that in the event of illness or injury requiring hospitalization, Girl Guides Association Malaysia will act on my behalf and make the necessary arrangements. I also understand that I may be asked to assist with the associated travel/medical costs incurred.

Signature of parent/guardian ...................................………..

I confirm the correctness of all data with my signature.

Signature of applicant .............................................………..