**Registration Form - GCF Singapore –Returnees’ Ministry Camp For OCFers and COCMers – Dec 9 to 13, 2015 at Fraser’s Hill, Pahang Malaysia.**

( To Be submitted by Mailing it to COCM Berhad, 697-2-2, Desa Kiara Condo., Jalan Damansara, 60000 Kuala Lumpur or by Emailing to [davidckliew@gmail.com](mailto:davidckliew@gmail.com) )

1. Title : Mr/Mrs/Miss/Pastor/Dr/Dato/Rev./Other

2. Name As Per IC or Passport \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Preferred Name To Be called \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Male/Female Age \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Handphone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. Profession/Occupation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7. Home Address : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

8. Accompanying Spouse a) Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

( Kindly complete another Registration Form for Spouse )

9. Accompanying Children a) Name/Names \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

b) Age/Ages \_\_\_\_\_\_\_\_\_\_ Date/Dates Of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

10. Preferred Twin- sharing Room Mate, if any :

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

11. Golfer : Yes/No ; Bird Watching : Yes/No ; Jungle Trekking :

Yes/No ; Visit To Indigenous People Village : Yes/No

12. Other Preferred Sport/Sports \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

13. Other Remarks such as using own transportation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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14. Special Need/Medical Condition : e.g. Vegetarian Diet, etc..

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15 : Emergency Contact Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relation : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ h/p \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

16. Total Fees Paid with attached Banking info : Rm \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

( Note Fees Paid are not refundable if withdrawal notice is less than 30 days )