

My child has my permission to attend and participate in KidzBlast 2018. I agree to indemnify, and not hold Covenant Evangelical Free Church and its representatives responsible for any claims including negligence, mishaps or accidents arising from or relating to my child's medical/development conditions and his/her participation in this event. In addition, I will not hold the organiser responsible for any items that my child may inadvertently lose during the event.

Name of Child:	
Name of Parent/ Guardian: _	
Signature:	Date:



Make new FRIENDS, Learn about how cool it is to be kind: Do to others what you want others do to you!



Children 7-12 Years Old



Sunday 29 April 2018 10:30am-12:30pm

WHERE?

Covenant EFC at Bukit Panjang or Woodlands

BUKIT PANJANG 10 Jelapang Road Singapore 677740



REGISTER NOW!

Fill up the registration form and

 i) Mail to KidzBlast, ACK Centre, 2 Kallang Avenue, CT Hub, #10-26, Singapore 339407

OR

ii) Drop it at the Security Guard House at Covenant Evangelical Free Church, either Bukit Panjang or Woodlands.

OR

iii) Take picture of the form, email to tng.sunbeam@cefc.org.sg or WhatsApp to 8467 6861

OR

iv) Register online through this link https://tinyurl.com/KidzBlastApr2018

Registration form can also be downloaded at https://cefc.ch/KidzBlast2018

STAND A CHANCE TO WIN...





redeem your door gift

For 1st time visitors only. Cut out this portion and present it at the event to receive a welcome gift! Pre-event registration is required.

WOODLANDS

90 Woodlands Drive 16 Singapore 737878



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REGISTRATION DETAILS

	Child's Particulars: (Please indicate accordingly)	
	☐ I am a non-Christian;	
	☐ I am attending Covenant EFC	
	☐ I am a Christian attending another church	
	(Church Name)	
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	Surname:	
	Given Name:	
	Gender: M / F Date of Birth: Date of Birth:	
	Blk No: Street Name:	
	Unit No: Postal:	
	Special Needs Condition (If any):	
	Medical Condition (If any):	
1	AA LELL EII GEGERALE IN	
	My child will participate in: (choose one only)	
	☐ Bt. Panjang Centre	
	□ Woodlands Centre	
	Parent/Guardian's Particulars: (Please indicate accordingly)	
	Name:	
	Gender: M / F	
ı	Primary Contact Number:	
	Email:	
1	In filling in this form, you are giving your consent to Covenant	

In filling in this form, you are giving your consent to Covenant Evangelical Free Church to keep and use your data for the purposes of KidzBlast 2018 and to contact you with updates or information relating to KidzBlast 2018 & other related events in future, as specified in our Data Privacy Policy. Please be assured that your personal information provided will be kept secure.