

**PLEASE WRITE CLEARLY. THANK YOU**

Name:  Mobile:

Age:  Sex:  Occupation:

Email:

**PLEASE INDICATE WHICH CLASS. FILL IN THE REQUIRED DETAILS. THANK YOU!**

Class:  Day:  Time:  am / pm

Amt:  Cheque ref:

Would you like to subscribe to our mailing list? Please circle answer. [ YES ] [ NO ]

Any health problems? Pls indicate. \_\_\_\_\_

How did you come to know of our society? \_\_\_\_\_

**By signing, I disclaim AMYS from any injuries that may occur during the class.**

**AMYS reserved the rights to cancel any class if deem fit**

**Registration is confirmed only upon receipt of FULL payment.**

**Cheques to be addressed to 'A M Y S'**

**----- please sign here -----**

**PLEASE ATTACHED PAYMENT [CHEQUE] AND SEND TO:**  
**1, Marine Parade Central, 07-01 Parkway Centre, Singapore 449408**  
**Tel: 6344 6519**

**F O R O F F I C E U S E O N L Y**

START DATE:  WEEKLY EVERY:  TIME SLOT:  MEMBERCARD REF No.:

AMT:  BAL:  CHQ REF:  RCPT:

BY POST / BY HAND:  PREPARED BY:

**REMARKS:** \_\_\_\_\_  
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