

Internal Booking Only



**SPORTS COMPLEX BOOKING FORM**

**Particulars**

Name	
Staff's / Student's ID	
IC No	
Email add	
Purpose of Booking	
Contact No	

**Booking Details**

*Facilities Required (please tick)*

<input type="checkbox"/>	Badminton (1/2/3)	<input type="checkbox"/>	Volleyball Outdoor (1/2)	<input type="checkbox"/>	Basketball (Indoor/Outdoor)
<input type="checkbox"/>	Squash (1/2)	<input type="checkbox"/>	Sepak Takraw (1/2)	<input type="checkbox"/>	Netball (Indoor 1)
<input type="checkbox"/>	Table Tennis (1/2)	<input type="checkbox"/>		<input type="checkbox"/>	Netball (Outdoor 1 / 2 )
<input type="checkbox"/>	Football / Rugby	<input type="checkbox"/>	Tennis (1/2)	<input type="checkbox"/>	Futsal (Indoor / Outdoor)
<input type="checkbox"/>	Others				

**Activity**

*(Please tick)*

<input type="checkbox"/>	<b>Club</b>	:	
<input type="checkbox"/>	<b>Individual</b>	:	
<input type="checkbox"/>	<b>Others</b>	:	

Date Required		To :	
Time Required		To :	

Advisor Club (if applicable)

Applicant:

\_\_\_\_\_

\_\_\_\_\_

Name :  
Contact No :

**(FOR DEPARTMENT USE ONLY)**

The above requisition is :

Remarks:

Approved       Not Approved

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Sport Officer

**CONFIRMATION OF SERVICE COMPLETED**

To be completed by Sports Unit	Remark
Acknowledged by:  _____  Date: _____	  _____  _____  _____