

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

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: _____	 _____ _____ _____