



Soka Gakkai Singapore
新加坡创价学会

Arts and Culture Group Application Form 艺术与amp;文化小组申请表格



Name of Group 小组名称 : please tick ONE option only / 请勾选一个 (√)			
<i>Choir Group 合唱组:</i>		<i>Movement Group 律动组:</i>	
<input type="checkbox"/> Rhythm of Peace (MD) 和平韵律 (壮年部)	<input type="checkbox"/> Golden Lion Dance Troupe (YMD) 金狮团 (男子部)	<input type="checkbox"/> Soka New Century Orchestra (4 Division) 创价新世纪乐团 (四部)	
<input type="checkbox"/> Tulip Chorus (WD) 郁金香合唱团 (妇人部)	<input type="checkbox"/> Gym Core (YMD) 健身操组 (男子部)	<input type="checkbox"/> Rainbow Chinese Orchestra (4 Division) 彩虹华乐团 (四部)	
<input type="checkbox"/> Soka Chorus (4 Division) 创价合唱团 (四部)	<input type="checkbox"/> Peony Dance (WD) 牡丹组 (妇人部)	<input type="checkbox"/> Courageous Musicians (Brass Band) (YMD) 勇音者组 (男子部)	
<input type="checkbox"/> Soka Junior Choir (Primary & Future Division) 创价少年合唱团 (小学部及未来部)	<input type="checkbox"/> Sunflower Dance Ensemble (YWD) 向日葵舞蹈坊 (女子部)	<input type="checkbox"/> Fife-and-Drum Corps (Kotekitai) (YWD) 鼓笛队 (女子部)	
	<input type="checkbox"/> Soka Youth Dance Crew (Youth Division) 创价青年舞蹈组 (青年部)		
Personal Particulars 个人资料			
Name as in NRIC (English) 身份证的英文姓名			Date of Birth 出生日期
Contact number (HP) 联络号码 (手机)		Email 电邮	
Occupation 职业		Nationality 国籍	Race 种族
<i>Please circle an option 请圈出适当的选项</i>	Division 部别: MD 壮年部 / WD 妇人部 / YMD 男子部 / YWD 女子部		
	Position 役职: Leader 干事 / Member 会员		
RHQ 区域总部	Zone 本部	Chapter 支部	District 地区
Membership in other A&C or Function Groups 参与其他文化 / 后勤小组			
Health Declaration 健康状况声明			
Please declare if any 如有, 请声明			
For Emergency Use 作为紧急使用			
Next of Kin's particulars 亲属资料			
Name 亲属英文名字		Contact number (HP) 联络号码 (手机)	
Relationship to the applicant 与参加者的关系			

I have read and fully understood the conditions stated below. 我已阅读并充分理解以下说明。

- 1) I consent to disclose the above-stated information to Soka Gakkai Singapore to facilitate my application for the Arts and Culture Groups; and I agree to the organising committee's use of this information for the purpose of contacting me for event participation.
我同意给予新加坡创价学会以上资料，以利便我参与此活动；同时我也同意筹委会使用这些资料作为活动的运作管理之用。
- 2) I understand that my application will be subject to a selection process by the Organisation.
我了解我的申请将会经过组织进行甄选。
- 3) I will abide by the Organisation's decision to withdraw my participation should I infringe on any of the rules and regulations of the Organisation including conduct and discipline.
若有违反组织的任何条规，包括品行与纪律方面，我会遵循筹委会取消参加资格的决定。
- 4) In the event of an accident or emergency, I permit the organising committee to seek treatment for myself as deem appropriate.
发生意外或紧急状况时，我允许筹委会为我安排合适的治疗。
- 5) I will not hold the Organisation liable in the event of any injury sustained in the event of my participation.
如果在参加期间受伤，我将不会向组织追究责任。
- 6) I understand that photographs and videos of this event, including my participation, will be taken for the purpose of reporting in the Organisation's official organ papers and website, and for historical archives.
我明白这项活动，包括我参与时的照片和录影，将会被作为组织刊物和网站，以及组织档案之用。
- 7) There should be no borrowing or lending of money between participants. This includes promotion of any form of multi-level marketing.
参加者之间绝不能有金钱的借贷。这包括各种多层次营销的促销活动。
- 8) There should be no joint business venture between participants.
参加者之间绝不能合伙做生意。
- 9) There should be no irresponsible relationship between men and women participants.
男女参加者之间绝不能有不负责任的关系。

Applicant's Signature 申请者签名: _____ **Date 日期:** _____

Parent/ Guardian Consent 家长/ 监护人同意书

To be completed and returned if the applicant is below 16 years old. 如果申请者未满 16 岁， 则需填写。

I, _____, parent/ guardian of _____,
(parent's /guardian's name 家长/监护人姓名) (participant's name 参加者姓名)

hereby consent to my child's/ ward's application to join the _____ Group.
我同意让我的孩子/ 亲属参加以上小组。

Parent/ Guardian's Signature 签名: _____ **Date 日期:** _____

Please submit completed form to SGS Headquarters during operating hours or email to info@soka.sg.
请在营运时间内将填妥的表格提交至 SGS 总部或发送电邮至 info@soka.sg.