



# REGISTRATION FORM

## COACHING SOCIAL PLAY SKILLS

### Beyond Basics Series

For parents/caregivers and professionals working with/caring for Primary School children with an Autism Spectrum Disorder

**Dr Lam Chee Meng**

**Autism Consultant**

**March 3, 2010 (Wednesday), 6 pm – 9 pm**

Pathlight School

**Closing Date: February 22, 2010**

**This training workshop has been pre-approved for Caregiver Training Grant (CTG)**

### 1. ORGANISATION DETAILS (for sponsored participants)

**Stamp** School or Organisation Name & Address here:

Registration Approved by:

(Name & Signature of School Principal or Head of Organisation)

Registration Liaison Person: \_\_\_\_\_

Tel: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

### 2. INVOICING DETAILS

Total Participants attending: \_\_\_\_ X **S\$69.55** = **S\$**\_\_\_\_\_

For CTG, please tick (✓) **(CTG form must be submitted to ARC by 20/02/10)**

**(CTG003/09/10)**  **1** X **S\$69.55** = **S\$69.55**

Name on invoice: \_\_\_\_\_

Name of person invoice to be sent to: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Tel: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_



(If there is more than 1 participant, please **SIGN & DATE** this page and complete Appendix 1)

<b>3. PARTICIPANT'S INFORMATION</b>		
<b>Name:</b>	<b>NRIC NO.</b>	<b>Designation:</b>
<b>Home Address:</b>		
<b>Contact No. (O/HP/H):</b>		<b>Email:</b>

**TERMS AND CONDITIONS:**

- Complete the Registration Form. The completed Registration Form, together with full payment, should be submitted to Autism Resource Centre (Singapore) or ARC at 5 Ang Mo Kio Avenue 10, Singapore 569739.
- Payment can be by cheque, in cash or via Nets at ARC office. All cheques must be crossed and made payable to "Autism Resource Centre (Singapore)". Cheque payment can be mailed.
- **If you** are the main caregiver of a Person with Disability (PWD) and **are applying for the Caregiver Training Grant (CTG) administered by Centre for Enabled Living (CEL)**, please:
  - Complete this **Registration Form**.
  - Complete the **CTG Application Form** (Annex A).
  - Obtain **verification** (on Section B of Annex A) from the Voluntary Welfare Organisation (VWO) that is providing services to the PWD you are caring for. Otherwise, you will have to provide a doctor's certification stating the nature of disability of the PWD.
  - Submit the CTG Application Form together with the completed Registration Form to Autism Resource Centre. The forms must reach ARC three (3) weeks before the training event.
  - If the CTG is not approved, you will have to make full payment of the workshop fees before attending the workshop.
  - If the approved CTG is insufficient, you will have to pay the balance of the workshop fees before attending the workshop.
  - **Once your registration is confirmed and you do not attend the training workshop, you will have to pay the workshop fees in full.**
- Confirmation of registration is at the discretion of ARC and is subject to availability of seats. Only fully completed registration forms with full payment will be accepted for consideration.
- There will be no refund of fees upon cancellation; however substitution of participant is allowed. Substitution request has to be made in writing and must reach ARC five (5) working days before the training event.
- ARC reserves the right to make changes and disclaim responsibility should any change(s) in this training event occur. In the event of cancellation by ARC **only**, a full refund of the fees paid will be made and no other claims allowed.
- For further information and/or clarification, please contact Peggy Chan or Lina Kam on telephone number 6323 3258 from Mondays to Fridays, between 8.30am to 5.30pm, or email Lina at [lina.kam@autism.org.sg](mailto:lina.kam@autism.org.sg)

**I acknowledge that I have read, understood and agree to the aforementioned terms and conditions.**

\_\_\_\_\_  
Signature of Principal/Head of Organisation & Date

\_\_\_\_\_  
Signature of Participant & Date

