NYP Young Engineering Innovator Award

Registration Form

Name Of Participant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NRIC:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Gender: Male/Female

Name of Sec School:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Class:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Personal Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Handphone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parental Consent**

I, (Name/NRIC) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ , consent to my child/ward (Name/NRIC)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ , to register and participate in NYP Young Engineering Innovator Award.

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

Parent/Guardian Signature Date

**Instructions:**

* Completed the registration form and submit to: nai\_song\_boh@nyp.edu.sg
* For enquires, please contact:
* Mr NAI Song Boh (6550-0975, nai\_song\_boh@nyp.edu.sg)
* Mr Simon ENG (6550-0518, simon\_sg\_eng@nyp.edy.sg)