

SINGAPORE CHINESE ORCHESTRA COMPANY LIMITED

VOLUNTEER APPLICATION FORM



Personal Particulars

Full Name / 姓名:		Age / 年龄:		Gender / 性别:	F / M
School or Organisation / 学校或机构:		Date of Birth / 出生日期:			
Spoken Language (s) / 交谈语言	华语 / English	Nationality / 国籍:			
Contact No. / 联络号码:		Email / 电邮:			

Preference

(Please circle below the area / date of interests, please note that timeslots are subject to availability and management's decision)

Section 1. Concerts* dates *To report at least 1 hour before concert *Minimum 3 hours and up to 5 hours of duty *Subject to change	
July	1, 2, 16, 23 (outdoor), 29, 30
August	6 (outdoor), 19, 20
September	2, 3, 11 (outdoor), 17 (outdoor), 24 (outdoor)
Remarks: No preference / Others – please indicate	

Section 2. Duties* *Subject to availability	
Front-of-house / Autograph session / Concert Ushers	
Remarks: No preference / Others – please indicate	

AGREEMENT

I hereby indemnify and hold blameless, the Singapore Chinese Orchestra Co. Ltd, from any claim of any nature and from any liability for any mishap arising from any cause whatsoever out of events related to or occurring during my volunteering service.

I understand I will not be paid for my services as this is strictly volunteering work.

Compulsory (Please tick)

I consent to the collection, use and/or disclosure of my personal data by Singapore Chinese Orchestra Company Limited for the purpose of receiving information and enquiry on the volunteering services in SCO concerts.

I have reviewed and declare that the personal data I have submitted is accurate and completed.

Signature of applicant

Date

Parental / Guardian Consent

(For applicants under 16 years old)

I, _____ (NRIC No. _____), hereby allow my child /

ward _____ (NRIC No. _____) to participate in the

Volunteer Programme organised by Singapore Chinese Orchestra, having fully understand and agree to abide by all rules and regulations imposed by the organisers.

I hereby declare and agree that I will have no claim whatsoever and howsoever against the organiser, Singapore Chinese Orchestra or their agents and associates for any injury or loss of any kind including loss of life that my child / ward may sustain during the whole period of Volunteer Programme.

Signature of parent / guardian

Date

NOTE: Please complete the volunteer application form and email to Ms Liang Shing at lstoi@sco.com.sg. Thank you!

~ End of application form ~