

Event Participation List (EPL)
 for
Staff's name *
Event/Date:

No.	Full Name	NRIC / Passport No. (Last 4 alphanumeric)	Nationality	Sex	Contact No.	Email	DOB (dd/mm/yyyy)	Staff/student No.
1								
2								
3								

No.	Full Name	Address	Home Tel	Blood Type	Special Medical Condition/ Drug Allergy	NOK's Name	Relationship	NOK Tel	NOK HP No	NOK Address (if different from earlier address)
1										
2										
3										

For other individual particulars, see individual Risk Acknowledgement and Consent Forms.



Department of Geography
Faculty of Arts and Social Sciences

Event Participation List (EPL)
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Staff's name *

Students participating (amend accordingly)