

## YOUTH ENRICHMENT PROGRAMME REGISTRATION FORM

Thank you for your interest in AMP's Youth Enrichment Programme (YEP).  
Please fill in your details below. Please ensure that all the details provided are true  
and correct at the time of submission.

Participant's Personal Particulars (In Capital Letters)					
Full Name (as in NRIC / Passport):					
Last 4 digits of NRIC / Birth Cert No.:	Date of Birth: (dd/mm/yyyy)	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Age:	Race:	Religion:
Primary / Secondary Level: (please circle)  [1] [2] [3] [4] [5] [6]	Stream: <input type="checkbox"/> Normal Academic <input type="checkbox"/> Normal Technical  <input type="checkbox"/> Others: _____			Class:  Hobbies/Interests:	
Home Address:					
Postal Code:					
Participant's Contact No.:		Name of School:			
_____ [Home]		CCA:		MOE-FAS Recipient:	
_____ [Mobile]				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Last Year Exam Results:			Preferred YEP Centre (Please tick):		
English Language: _____			<input type="checkbox"/> YEP@West (AMP Jurong Point)		
Mathematics: _____			<input type="checkbox"/> YEP@East (AMP Pasir Ris)		

Is the student enrolled in the Mendaki Tuition Scheme (MTS) or Collaborative Tuition Programme (CTP)?

Yes       No

If yes, please indicate below:

MTS       CTP      Name of Centre: \_\_\_\_\_

**Parents' Particulars**

Mother's / Guardian's Particulars		Father's / Guardian's Particulars	
Name:		Name:	
Mobile no.:	Marital Status:	Mobile no.:	Marital Status:
Occupation:	Income:	Occupation:	Income:

**IMPORTANT POLICY FOR STUDENTS**

**1. Payment Matters**

- 1.1 The standard programme fee is \$30 per pax, per month. Students who are under MOE-FAS are eligible for a further subsidised rate of \$20 per pax, per month.
- 1.2 Payment of fees by PayNow or Bank transfer is preferred. A payment schedule will be provided upon registration confirmation.
- 1.3 Parent/Guardian is to ensure that an official AMP receipt is issued for each payment made and verify that the amount indicated in the receipt is correct.
- 1.4 **The above mode of payment is for students under individual enrolment. Payment arrangement for students enrolled by schools will be between AMP and the schools.**

**2. Late Payment Policy**

- 2.1 As all YEP participants enjoy a highly subsidised fee rate, Parents/Guardians are encouraged to make the payment promptly as scheduled.
- 2.2 Parents/Guardians will inform the AMP Officer should he/she require an extension or financial assistance.

**3. Withdrawal Policy**

- 3.1 Withdrawal will only be accepted officially when parent/guardian submits a **letter of withdrawal** to the AMP officer.

#### 4. Absenteeism Policy

- 4.1 All absence must be accompanied by relevant & valid documents.
- 4.1.1 If the child/ward is ill, he/she is expected to submit a **Medical Certificate or a letter of explanation from the parent/guardian by the next session.**
  - 4.1.2 If the child/ward is unable to attend due to his/her filial obligations at home (e.g. accompanying a family member to the clinic, etc.), or due to the death of a close relative, he/she is expected to **submit a letter of explanation from their parent/guardian by the next session.**
  - 4.1.3 If a program organised by the child's/ward's school (or other institutions deemed acceptable by AMP) clashes with his/her YEP session, and his/her attendance in it is hence a must, he/she is expected to notify the AMP Officer **at least 1 week in advance** via a written letter from the program organiser. Only a letter from the program organiser is acceptable as valid document.
  - 4.1.4 If a child has to leave YEP early due to an emergency at home upon the request of his/her parent/guardian, the parent/guardian is expected to notify the AMP Officer or the Mentor through phone call. **A letter of explanation from the child's parent/guardian is expected to be given by the next session.**
- 4.2 Absences other than those specified above, OR those not accompanied by the required documents would be considered as **invalid absence** by AMP.

## DECLARATION OF CONSENT

I verify that the above information is correct and true. I hereby consent to the collection and use of information collected and stored relating to my child/ward.

Information may be shared with partners of the organisation with regards to participation in collaborative programmes. All information will be stored and used for correspondence purposes in accordance with the Data Privacy Policy and the Personal Data Protection Act (2014).

I will not hold AMP responsible for any injury incurred on or sustained by my child/ward during the course of his/her enrolment in the programme and its related activities.

All pictures and/or videos taken during the programme will be used for the organisation's publicity purposes.

I allow AMP to use the personal data in this application form to keep me updated of any AMP activities through the use of electronic and non-electronic types of communication.

I have read and understood the programme's policy on payment, withdrawal and absenteeism.

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Signature of Parent/Guardian

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Date