

Registration for SGA Referees Register

To:

Chairman
SGA Rules Sub-Committee

I wish to register with the SGA as an SGA Referee and my personal details are as follows:

Name: _____

NRIC No: _____ Gender: Male / Female

Nationality: _____

Date of Birth: _____ Place: _____

Home Address: _____

Email Address: _____ Mobile No.: _____

Date of attending R&A Rules School (Level 2) / Tournament Administrators and Referees School (TARS)*: _____

Venue: _____

Passing mark: _____

* delete as appropriate

Signature: _____

Date: _____