



**GUR Healthy Lifestyle Programme**  
**Sports Participation Record Form**

**Personal Information**

**Name of Student** : \_\_\_\_\_  
**Student ID No.** : \_\_\_\_\_

**Record of Sports Participation**

This is to certify that the above named person has joined the below sport activities organised by our association / club.

**Name of Event** : \_\_\_\_\_  
**Event Organizer** : \_\_\_\_\_  
**Date & Time** : \_\_\_\_\_  
**Venue** : \_\_\_\_\_  
  
**Contact Person** : \_\_\_\_\_  
**Job Position** : \_\_\_\_\_  
**Contact Telephone** : \_\_\_\_\_  
**Contact Email** : \_\_\_\_\_

**Official Chop** : \_\_\_\_\_  
**Signature of Contact Person** : \_\_\_\_\_  
**Date** : \_\_\_\_\_