

**Professional Seminar  
Engaging Youths to Succeed in Schools  
In conjunction with ASEAN+3 Seminar on Urban Youth Work IV  
3 – 5 March 2010, Concorde Hotel**



Enquiries Please contact Betty or Yi Juan at 6759 6821

Fee 3 Mar 10 \$350 per person (includes tea and lunch)  
\$300 per person (early bird registration; for first 40 participants)

3 – 5 Mar 10 \$1300 per person (includes tea, lunch and 2 training materials)  
\$1200 per person (early bird registration; for first 10 participants)

- \* No refund for any cancellation. Substitutes are allowed.
- \* Cheque payment: Payable to "Students Care Service"
- \* Closing date for registration: 19 Feb 10

Registration via Fax 6759 6829 E-mail [betty\\_tay@students.org.sg](mailto:betty_tay@students.org.sg)  
Mail Students Care Service, Blk 202, Yishun St 21, #01-89, S(760202)

For more information, please log on to [www.students.org.sg](http://www.students.org.sg)

**Registration**

**Organisation Details**

Name of Organisation / School: \_\_\_\_\_

Contact Person (Mr / Mrs / Ms / Dr): \_\_\_\_\_

Tel: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ S( )

VCF Ref No. (For VWOs affiliated to NCSS only): \_\_\_\_\_

**Details of Participants (if there are more than 3 participants, please photocopy this form)**

1) Full Name (Mr / Mrs / Ms / Dr): \_\_\_\_\_ NRIC / Fin No.: \_\_\_\_\_ Designation: \_\_\_\_\_

Address: \_\_\_\_\_ S( )

Office Tel: \_\_\_\_\_ Mobile: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

**Concurrent Workshop Choices** Choice 1: Concurrent Workshop No.: \_\_\_\_\_  
Choice 2: Concurrent Workshop No.: \_\_\_\_\_  
Choice 3: Concurrent Workshop No.: \_\_\_\_\_

2) Full Name (Mr / Mrs / Ms / Dr): \_\_\_\_\_ NRIC / Fin No.: \_\_\_\_\_ Designation: \_\_\_\_\_

Address: \_\_\_\_\_ S( )

Office Tel: \_\_\_\_\_ Mobile: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

**Concurrent Workshop Choices** Choice 1: Concurrent Workshop No.: \_\_\_\_\_  
Choice 2: Concurrent Workshop No.: \_\_\_\_\_  
Choice 3: Concurrent Workshop No.: \_\_\_\_\_

3) Full Name (Mr / Mrs / Ms / Dr): \_\_\_\_\_ NRIC / Fin No.: \_\_\_\_\_ Designation: \_\_\_\_\_

Address: \_\_\_\_\_ S( )

Office Tel: \_\_\_\_\_ Mobile: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

**Concurrent Workshop Choices** Choice 1: Concurrent Workshop No.: \_\_\_\_\_  
Choice 2: Concurrent Workshop No.: \_\_\_\_\_  
Choice 3: Concurrent Workshop No.: \_\_\_\_\_

Total number of participants: \_\_\_\_\_ Total amount payable: \_\_\_\_\_

\*We would do our utmost to place you in your preferred choices. However, on occasions when we are constrained by the need to keep the learning group small and conducive, we would greatly appreciate your understanding if this is not possible.

Thank you.