



Student Activities Section

Sport & Recreational Activities Health club

Non student registration Form

Full Name :			
Nationality:	Marital Status :		
Telephone:	Mobile Phone :		
Status of membership			
One semester One Month Declaration I have to read and understand the Rules and Regulations which apply to health club. I confirm all the information I have given on this application form is correct. Signature: Date: For Office use only:			
		Issue Date	
		Date of Application Received :	Coordinator of health club
		Membership No :	•
		Medical examination	
		After medical examination the applicant was for	und: fit [_] unfit [_]
Doctor's name:			