



## FACILITY RENTAL APPLICATION FORM

### PARTICULARS OF REQUESTOR

Name:

Email:

NRIC No. (Last 4-digits):

Contact No.:

### BILLING DETAILS

Company Name:

Email:

Billing Address:

Contact No.:

### RENTAL INFORMATION

#### Event Purpose

- Training / Coaching  
 Concert / Performance

- Seminar  
 Others (please specify):

Event Start Date:

Event End Date:

Event Start Time:

Event End Time:

Reception (food/drinks): Yes / No \*

Total no. of Pax:

Target Audience:

### FACILITIES REQUIRED

#### Sports Facility (please indicate quantity beside your request) \*

- |   |                      |  |                      |  |                      |
|---|----------------------|--|----------------------|--|----------------------|
| <input type="checkbox"/> ISH Level 2 (Indoor) Court | <input type="text"/> | <input type="checkbox"/> Badminton Court | <input type="text"/> | <input type="checkbox"/> Tennis Court                  | <input type="text"/> |
| <input type="checkbox"/> ISH Sheltered Court        | <input type="text"/> | <input type="checkbox"/> Squash Court    | <input type="text"/> | <input type="checkbox"/> Gym Hall (Exclusive use)      |                      |
|   |                      |  |                      | <input type="checkbox"/> Track & Field (Exclusive use) |                      |

#### Non Sports Facility \*

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Khoo Auditorium             | <input type="checkbox"/> Dance Studio 1                | <input type="checkbox"/> Serai Room 1 (30 pax) |
| <input type="checkbox"/> Khoo Auditorium (Rehearsal) | <input type="checkbox"/> Dance Studio 2                | <input type="checkbox"/> Serai Room 2 (40 pax) |
| <input type="checkbox"/> Lobby at Khoo Auditorium    | <input type="checkbox"/> Dance Studio 3                | <input type="checkbox"/> Serai Room 3 (60 pax) |
| <input type="checkbox"/> Lecture Theatre             | <input type="checkbox"/> School Hall (air-conditioned) | <input type="checkbox"/> Cinnamon Room         |
| <input type="checkbox"/> Seminar Room 1              | <input type="checkbox"/> Covered Amphitheatre          | <input type="checkbox"/> Nutmeg Room           |
| <input type="checkbox"/> Seminar Room 2              | <input type="checkbox"/> Open Amphitheatre             | <input type="checkbox"/> Tamarind Room         |
|  | <input type="checkbox"/> Atrium (1st storey)           | <input type="checkbox"/> Canteen               |

#### Equipment (please indicate quantity beside your request) \*

- |   |                      |   |                      |                                     |                      |
|---|----------------------|---|----------------------|-------------------------------------|----------------------|
| <input type="checkbox"/> Condenser Microphone                     | <input type="text"/> | <input type="checkbox"/> Wireless Microphone          | <input type="text"/> | <input type="checkbox"/> Dance Mats | <input type="text"/> |
| <input type="checkbox"/> Dynamic Microphone                       | <input type="text"/> | <input type="checkbox"/> Follow spot (excl. operator) | <input type="text"/> | <input type="checkbox"/> Tables     | <input type="text"/> |
| <input type="checkbox"/> Suspended Condenser<br>Microphones (4's) | <input type="text"/> | <input type="checkbox"/> Projector                    | <input type="text"/> | <input type="checkbox"/> Chairs     | <input type="text"/> |
|   |                      | <input type="checkbox"/> CD-RW Deck Recording         | <input type="text"/> | <input type="checkbox"/> Wheelchair | <input type="text"/> |

### DECLARATION

I declare that the above particulars are true and I agree to abide by the Rules & Regulations governing the application and use of the School facilities. I understand that my application may be rejected by the School Administration without assigning any reason.

\_\_\_\_\_  
Authorised Signature

\_\_\_\_\_  
Official Stamp of Organisation

\_\_\_\_\_  
Date

\* Please select where applicable