APPLICATION FORM	
Family Name:	Name:
Current Address:	Nationality:
Email:	Tel:
University:	
Address:	
Emergency contact:	Relationship:
Name:	
Current Address:	Tel:
	Email:
Precaution:	
1. Any sickness:	
2. Any allergy:	
3. Ability to swim:	
This is to state that the applicant has agreed to join this event with any injuries or liabilities will be the responsibility of the applicant.	
Signature:	
Name:	
Mailing Address:	
School of Fisheries and Aquaculture Sciences, Universiti Malaysia Terengganu, 21030 Kuala Nerus, Terengganu, Malaysia.	
Or	
Fax: +(609) 668 5002	