

SINGAPORE CHINESE ORCHESTRA CO LTD
SCH & ARTS GROUPS PARTNERSHIP PROGRAMME (SAPP)
APPLICATION FORM



Part A: Applicant's Particulars		
Name of Group/Address:		
Contact Person and Designation:		
Contact No: (O)	Fax:	E-mail:
Part B: Details (please tick appropriate box)		
<p><u>Application</u></p> <p><input type="checkbox"/> Yes! My Group would be keen to sign up for the free SAPP. (Kindly note that your group needs to be incorporated in Singapore)</p> <p><input type="checkbox"/> Maybe. My Group would like to meet up with SCO to find out more about SAPP before signing up.</p> <p><u>Package Option</u></p> <p><input type="checkbox"/> My Group will be interested in Package 1. (Kindly note that the 4th concert hall booking must not exceed 2 years from the 1st booking)</p> <p><input type="checkbox"/> My Group will be interested in Package 2.</p> <p><u>Number of Concert Hall Performances By Your Group in a Calendar Year</u></p> <p><input type="checkbox"/> None <input type="checkbox"/> One <input type="checkbox"/> Two <input type="checkbox"/> Three <input type="checkbox"/> Four <input type="checkbox"/> Five and above</p> <p><u>Free Concourse for Lunchtime Performances</u></p> <p><input type="checkbox"/> Yes! My Group would like to use the Concourse for free to present lunchtime performances.</p> <p><input type="checkbox"/> Maybe. My Group would like to find out more about this lunchtime performance initiative.</p> <p><u>Others</u></p> <p><input type="checkbox"/> My Group would like to receive regular updates on SAPP.</p>		
Part C: Acknowledgement		
<p>I, _____, NRIC No. _____ the authorised representative of the Group _____, undertake to apply for SAPP on behalf of the Group. I certify that all information given above is true and correct.</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Signature _____ Date</p>		

