

THE LEADERSHIP CAMP IS BACK!!!

- The Camp is especially designed for younger members, graduates and students. It will provide a supportive and challenging environment where participants will “participate and learn through active involvement”. It will foster self-confidence and enable them to be effective leaders.
- The training and learning methods employed will make this Camp fun and challenging. Participants are encouraged to use and practise the knowledge and skill gained during the training and apply them in their actual academic or work environment.
- The 2 days/ 1 night camp will primarily focus on team development for effective decision-making, interpersonal communication and leadership skills. The programme will include obstacle course, team performance, jungle-trekking and others. Integrated with this will be outdoor recreation activities and a variety of assignments. Participants will certainly have a fun-filled learning and confidence-building experience!



VENUE:
OUTBACK BROGA,
NEGERI SEMBILAN

DATE:
16 & 17 NOVEMBER 2019
SATURDAY & SUNDAY

The FEES is inclusive:

- Accommodation
- Certificate
- Meals

Transportation:
RM125 (if provided
by University)
RM160 (no
transportation)



**Send/Fax in now your registration form together with the participation fee by Deadline.
Registration is on a first-come-first-served basis!**

**For more information, please contact Students Department
at 03-2282 9276 ext 705, 706, 707, 708 or email us at students@maicsa.org.my**

REGISTRATION FORM**MAICSA LEADERSHIP CAMP 2019***Personal Details*

Name (Mr/Ms): _____

MAICSA Membership / Graduateship / Studentship No: _____

Sex: _____ NRIC No. (New): _____

Institution/ Organisation: _____

Correspondence Address: _____

Postcode: _____ Email Address: _____

H/P No: _____ Tel No: _____

Marital Status: _____ Height: _____ Weight: _____

Blood Type: _____ Resting Pulse Per Minute: _____

In Case of emergency, please contact: _____ (Name)

_____ (Tel No)

Special dietary requirements (if any): _____

If you suffer from any ailments, allergies or medical condition, we should know of it.

Please Specify: _____

PAYMENT DETAILS*(Please Tick)* I enclose cheque/ bank draft no _____ for amount of RM _____ and made payable to "MAICSA" Payment via online internet banking offered by Maybank Account: 5144 8630 1427 Please charge RM _____ (non-refundable) to my credit card:
Please tick accordingly Visa Mastercard

Bank: _____ Card No: _____

Name on the card: _____ Expiry Date: _____

Signature: _____ Date: _____
*(Signature must correspond with the specimen signature on card)*Approval *(for participants below 21 years of age)*I, *(Name of Parent/Guardian):* _____ NRIC No: _____

and my child/ward will not hold MAICSA nor staff responsible if any mishap should happen to my child/ward. I understand that the staff will organise the camp to the best of their abilities with the necessary precautions.

Signature: _____

Date: _____

FOR OFFICE USE:**RECEIPT NO:** _____