



Application for Security Pass for Parents / Guardians of BRMCK Students

Name of 1st Authorised Person (BLOCK LETTERS – max 16 characters):	Ref: _____	Please paste passport-sized photo here
NRIC/ Fin No:		
Contact No:		

Name of 2nd Authorised Person (BLOCK LETTERS – max 16 characters):		Please paste passport-sized photo here
NRIC/ Fin No:		
Contact No:		

Name of Child (BLOCK LETTERS):	Class / Level / Session / Year :

Please complete the following if you have more than one child/ward studying in BRMCK

Name of Child (BLOCK LETTERS):	Class / Level / Session / Year :

Terms & Conditions:

1. This security pass is only for parents/guardians whose child/ward is studying in BRMCK.
2. For application of the security pass, please submit the completed application form and a cheque of **SGD \$60.70** [\$10.00 (+ prevailing GST) + \$50.00 deposit] addressed to **'BARKER ROAD METHODIST CHURCH KINDERGARTEN.'** The \$50.00 deposit for each security pass applied will be refunded when the security pass is returned upon graduation or withdrawal of the student.
3. If you wish to include the 2nd authorised person who will be coming to school to drop off/ pick up your child, please include his/her information and photo in the appropriate spaces.
4. Parents/Guardians are advised to file a police report if the card is lost or stolen. The replacement cost for the lost pass is \$50.00.
5. **You are required to display the Security Pass upon entry into BRMCK/ ACS Barker Road Campus and while in the campus at all times.**
6. You are required to sign for a Visitor Pass at the Guard Post if you are unable to display the Security Pass upon entry. Under such circumstances, the Security Guard will request for a photo identification to verify your particulars.

I, _____, NRIC No _____ have read and understood the terms & conditions stated above and will abide by them. I undertake to return the security passes upon graduation or withdrawal of my child/ward at BRMCK.

Name & Signature of Parent/ Guardian

Date

FOR OFFICIAL USE ONLY

APPLICATION					
No of Passes:	_____	Payment:	\$ _____	Cheque (Bank / No):	_____
REFUND OF DEPOSIT					
No of Passes Returned:	_____	Refund Amount:	\$ _____	Cheque (Bank / No):	_____