**LIST OF RECIPIENTS**

| **DIVISION CODE: \_\_\_\_\_\_** | | | | |
| --- | --- | --- | --- | --- |
| **(ACTIVITY TITLE)** | | | | |
| **(VENUE)** | | | | |
| **(DURATION)** | | | | |
| NAME  (First Name, MI, Surname) | | SEX  (M/F) | DIVISION | I hereby signed to acknowledge the receipt of training materials/tokens/donations and etc. consists of: |
| SIGNATURE OF RECIPIENT |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

CERTIFIED CORRECT:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
| **DATA PRIVACY NOTICE: Data and information in this form are intended exclusively for the purpose of this activity. This will be kept by the process owner for the purpose of verifying and authenticating identity of the participants. Serving other purposes not intended by the process owner is a violation of Data Privacy Act of 2012. Data subjects voluntarily provided these data and information explicitly consenting the process owner to serve its purpose.** |