

APPRECIATING NSMEN VIDEO COMPETITION 2025

SUBMISSION FORM

Fill in and submit this form together with your video to appreciatingnsmen@safra.sg

Individual

Participation Type

Please only select 1 (one)

Personal Details				
Team	Name (as per NRIC) :			
Leader / Member 1	Email Address :	Gender (M/F)	Age	
	Contact Number :			
Member 2	Name (as per NRIC) :			
	Email Address :	Gender (M/F)	Age	
	Contact Number :			
Member 3	Name (as per NRIC) :			
	Email Address :	Gender (M/F)	Age	
	Contact Number :			
Member 4	Name (as per NRIC) :			
	Email Address :	Gender (M/F)	Age	
	Contact Number :			
Member 5	Name (as per NRIC) :			
	Email Address :	Gender (M/F)	Age	
	Contact Number :			
School Details				
Name of Sc	hool / Tertiary Institution :			
Name of Co	ourse (if applicable) :			
School year (if applicable) :				
Name of Teacher / Lecturer :				
Email of Teacher / Lecturer :				
Contact number of Teacher / Lecturer :				
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Team □



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Video Details			
Video Title :			
Synopsis :			
By submitting this form, I confirm that:			
(a) the information provided by me is true and correct,			
(b) I consent to SAFRA's collection, use and disclosure of my personal data for the purposes of registration and managing the "Appreciating NSmen Video Competition", including but not limited to contacting me via email, phone call and short message service (SMS) on the event and for other applicable purposes as set out in SAFRA's Privacy Policy (https://www.safra.sg/privacy-policy), as amended from time to time, which outlines how SAFRA manages my personal data in accordance with the Personal Data Protection Act 2012; and			
(c) where Personal Data of any third party is provided by me, I have obtained the consent of the third party to SAFRA's collection, use and/or disclosure of those Personal Data.			
☐ Yes I agree.			
Signature Date			