

Student Activities Section
Sport & Recreational Activities
Health club

Student registration Form

Student Name:
Collage :
ID :
Nationality :
Mobile: Pin code :
Email:
Participation period : <input type="checkbox"/> Monthly <input type="checkbox"/> Semester
Category :

Student signature : _____

Coordinator of health club : _____

Medical examination

After medical examination the applicant was found : fit unfit

Doctor's name:.....

Signature:.....

To contact:

Female Campus

Ms. Hanan Radwan (Health Club Manager)
Phone: +971 (0)3 7136659

Male Campus

Mr. Hani (Health Club Manager)
Phone: +971 (0)3 7134847