



Chartered Institute of Logistics and Transport Singapore  
Youth Chapter

## *Visit to YCH Group*

**Date: 5th August 2009 (Wednesday PM)**



**YCH Group : A provider of integrated logistics services in Asia-Pacific**

### *If you are*

- *Eager to learn more on warehousing and freight management*
- *Keen to see how a leading third-party logistics company functions*
- *Explore the potential career opportunities in the logistics industry*
- *Make new friends who share the same interest in logistics and supply chain*

**Come and join us for the YCH tour!**

### **Program Details:**

- 1.15pm Meet at CILT office for briefing. (Light refreshment provided)
- 1.50pm Depart CILT office for YCH
- 2.30pm Arrive at YCH office
- 2.40pm Start of Corporate Presentation
- 3.10pm Site Visit
- 4.00pm End of Visit (Transport provided to Boon Lay MRT station)

**Fees:** (Payment by cheque or credit card 1 week before the visit.)

Member : \$10

Non-member : \$15

### **Registration:**

Group size is limited. Registration is on a **first-come-first-served** basis. Please register **before 15 July 2009** using the registration form enclosed:

- **Via email** to [ciltyc@cilt.org.sg](mailto:ciltyc@cilt.org.sg):
- **Via fax** to 6275 3826

Please also complete the Indemnity Form and submit it before the visit.

For those who would like to join as members, please fill in the attached membership registration form and sent it to us.

### **\*Disclaimers:**

- ✓ CILT Singapore reserves the right to postpone or cancel the visits. Should the alert for H1N1 become orange, earlier arrival is required for additional checks. Should the alert become red, the visit will be cancelled
- ✓ YCH Group may vet and decline interested participants from the industry for competitive reasons

# REGISTRATION FORM

## SITE VISIT TO YCH Group

Date : 05 Aug 2009, Wednesday

Time : 1.00pm to 4.00pm, with light refreshments served

Venue to meet up: CILT Singapore, 5 Jalan Kilang Barat, #06-03 Petro Centre, Singapore 159349

Fee : \$10 (Member) \$15 (Non-Member)

**The Reply Slip** 回复

Please fax or email the attached Reply Form confirming your attendance by 31<sup>st</sup> July 2009. Please make payment on the day of the visit at the CILTS office.

Please do not hesitate to contact the CILTS Secretariat if we can be of any assistance.

**Our contact details:**

Tel: 6275 0233

Fax: 6275 3826

Email: [ciltyc@cilt.org.sg](mailto:ciltyc@cilt.org.sg)

Address: 5 Jalan Kilang Barat #06-03 Petro Centre Singapore 159349

Name (1): \_\_\_\_\_ Name (2): \_\_\_\_\_

CILT M'ship No.: \_\_\_\_\_ CILT M'ship No.: \_\_\_\_\_

IC/Passport No: \_\_\_\_\_ IC/Passport No: \_\_\_\_\_

Designation: \_\_\_\_\_ Designation: \_\_\_\_\_

Tel (O): \_\_\_\_\_ H/P: \_\_\_\_\_ Tel (O): \_\_\_\_\_ H/P: \_\_\_\_\_

Email: \_\_\_\_\_ Email: \_\_\_\_\_

Name (3): \_\_\_\_\_ Name (4): \_\_\_\_\_

CILT M'ship No.: \_\_\_\_\_ CILT M'ship No.: \_\_\_\_\_

IC/Passport No: \_\_\_\_\_ IC/Passport No: \_\_\_\_\_

Designation: \_\_\_\_\_ Designation: \_\_\_\_\_

Tel (O): \_\_\_\_\_ H/P: \_\_\_\_\_ Tel (O): \_\_\_\_\_ H/P: \_\_\_\_\_

Email: \_\_\_\_\_ Email: \_\_\_\_\_

Company/School: \_\_\_\_\_

Address: \_\_\_\_\_



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**INDEMNITY FORM**

INDEMNITY AGAINST LIABILITY FOR VISIT TO YCH Group

**For Participant**

I, \_\_\_\_\_ (Name), NRIC / Passport No. \_\_\_\_\_,  
participate on my own free will in the above-mentioned activity organized by the Chartered Institute of Logistics and Transport on 5<sup>th</sup> Aug 2009, having understood the risks involved in the above mentioned activity.

I hereby declare and agree that I will have no claim whatsoever and howsoever against the organizers, the **Chartered Institute of Logistics and Transport Singapore** and the **Chartered Institute of Logistics and Transport Singapore Youth Chapter**, for any injury or loss of any kind including loss of life that I may sustain during the whole period of the above-mentioned activity.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

**For \*parent / guardian of participant of below 21 years old**

I, \_\_\_\_\_ (Name), NRIC/ Passport No. \_\_\_\_\_, hereby allow my \*child/ward \_\_\_\_\_ (Name), NRIC/Passport No. \_\_\_\_\_ to participate in the above-mentioned activity, having fully understood the risk that my \*child/ward will be involved in by participating in the above-mentioned activity.

I hereby declare and agree that I will have no claim whatsoever and howsoever against the organizers, the **Chartered Institute of Logistics and Transport Singapore** and the **Chartered Institute of Logistics and Transport Singapore Youth Chapter** for any injury or loss of any kind including loss of life that my \*child/ward may sustain during the whole period of the above mentioned activity.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**CILT Youth Chapter reserves the right to bar a participant from joining the activity if this form is not duly completed and submitted before the commencement of the activity.**