

TRACETOGETHER (TT) TOKEN REQUEST FORM

l	(Name	of	Parent/Guardian)	of
	`		,	

(Namo of	child/ward)	from	class	requ	oct
(mame or	chilu/waru)		Class	requ	esi

for the school to issue a TT Token to my child/ward^.

Signature of Parent/Guardian*

Relationship to Child

Date

*Delete as appropriate

^ Please note that if your child/ward has already been issued a TT Token as part of the national distribution exercise by Community Centres/Clubs (CCs), the school will not be issuing another TT Token to your child/ward.

Springdale Primary School

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