



NFOM-NOP-PRC-012-FRM-001

Applicant's Picture

	Membership	Request For	rm	
Applicant Details				
First Name *	Budg	et Code/Cost center	* Em	np Group *
Last Name *	NEO	M ID *		
Mobile no. *	NEO	M Email *		
Date of Birth *	Dura	tion (monthly/annuall	y) *	
Service Provider's Approval *	•		·	
Company Name *	D	epartment *		
Approver Name *		Position *		
Signature *	D	ate *		
NEONA				
NEOM Approvals *	cost of requested service to the indica	ted Cost Center for the actual u	se.	
686		out court control for the decidar of		·!
Job Position	Name	П	S	ignature

NEOM Approvals *							
I hereby authorize charging of the cost of requested service to the indicated Cost Center for the actual use.							
Job Position	Name	Signature					
Sector Head / Department Head							
Sr. Manager- Leisure and Logistics							
NEOM Operations – Senior Executive Director							

Terms and Conditions:

- All applicants must be approved by Senior Manager of Leisure and Logistics and Executive Director of Community Services
- Membership is available to Supplemental Manpower or Service Provider Personnel working inside NEOM with appropriate contractor / service provider ID.
 All applicants must provide one (1) photo upon application.
- Each Service Provider Company is responsible for the actions of its employees using the Service Provider Recreation Membership Scheme.
- Use and entry to NEOM Community Recreation along with NEOM SP ID card is shown.

 Additional fees apply to current recreation paid services i.e. cinema and fitness classes.

- Additional rees apply to current recreation paid services i.e. chemia and influess classes.
 Service provider applicants may apply for a month membership before renewal is required.
 All annual memberships must be paid in full at any Recreation Facility reception desk upon application approval.
 NEOM reserves the right to refuse or revoke any service provider recreation membership at any time and without refund.
 NEOM will review the service provider recreation membership scheme annually and reserves the right to cancel the scheme if necessary.

Acknowledgement:

I undersigned in submitting this application agree to abide by the decision of the recreation management, which shall be final. I further agree that should Membership be approved I will be bound by the rules and regulations of the Community Recreation Department and the Service Provider Membership.

User Acceptance *	I hereby acknowledge and agree to abide by the guidelines set out within the Recreation Facility Eligibility Guidelines					
	Full Name	Signature	Date			
			A			

DOCUMENT CODE: NEOM-NOP-PRC-012-GUI-001	REVISION CODE: A	PAGE 7 OF 7	