SAFE SPORT CLIMBING GUIDE

Think Safe. Play Safe. Stay Safe.

Sport SINGAPORE

LIVE BETTER THROUGH SPORT

healthy lifestyle. It is tasked to promote safety throughout Singapore's sporting community and to inculcate a safety-first mentality in the minds of every stakeholder. Therefore, SportSG has set a corporate goal of zero injuries, in the belief that all accidents are preventable. Emphasising the need for personal accountability, SportSG also urges people to be responsible for the safety of others. For more information, please visit, *https://www.sportsingapore.gov.sg/Sports-Education/Sports-Safety*

Acknowledgment

SportSG would like to thank and acknowledge Singapore Sport Climbing and Mountaineering Federation (SSCMF) and the Canadian Society for Exercise Physiology, for their participation in the consultation process; including the provision of materials and photos towards the production of this guide. Their feedback and suggestions greatly improved the final delivery of this publication.

Singapore Sport Climbing and Mountaineering

CSEP | SCPE Canadian Society for

CONTENTS

March 2022

exploring the cliffs of Dairy Farm
the first permanent artificial climbi
at SAFRA Tampines. This was
introduction of the national climb
which was a significant national
Singapore Sport Climbing and
Federation's (SSCMF) annual climb

This sport is now growing rapid
There are now more climbing wal
in schools and premises of uniform
and more than 40 climbing wa
gyms are currently being operate
and commercial agencies in Singa

Sport climbing is, essentially, comp
However, it can also be enjoyed
all from as young as 3 years old.

The International Federation of
(IFSC) estimated that the spor
popularity boom, with an estim
people across the world climbin
hotspots in Japan and the US.

The sport demands incredible st
muscle strength across the body
haul themselves up vertical and
gripping on to a variety of holds,
big enough for a fingertip.

The mental strength is equally
competitions, athletes are not all
wall before they compete, mea
make quick, on-the-spot decisio

apore Sport Climbing and Mountaineering Federation (SSCMF).

courses are offered by SSCMF, and are available for beginners to

vel 1
System designed for people with no prior knowledge of sport

vel 2
Climbing that builds on the top-rope skills acquired from Level
a progression into lead climbing on artificial climbing walls.

vel 3
d Climbing that introduces the techniques of climbing bolted
safely.

the above syllabus, please refer to www.smf-climbing.org under

een two climbers on a
sloped at a gravity-
ngle. The first climber
o of the wall will be
. A male climber will
5 seconds; whilst a
ke around 7 seconds.

etre-high wall. Climbers
mb as many set routes
can. Scoring of points
fficulty. This is the only
at is competed without

inutes to climb as far as
e wall. Each competitor
t to climb. In the event
ng, the highest position
slip) will be recorded as

Static rope

This type of rope has very little stre
to be used for climbing. It is prim
abseiling, or hauling. Static ropes
their sheath, which is of one color.

Dynamic rope

This type of rope can stretch to n
length, so that it is able to absorb th
dynamic rope is only used for climb
have a multi-colored sheath or brigh

Dynamic rope

Basic rope care

1. Keep your rope clean
   Dirt particles are extremely abrasive to ropes. Always keep you
   and flake it out on a tarp when climbing. Avoid stepping on y
   so can drive dirt particles deeper into the rope surface.

2. Care for your rope
   Wash your rope in cold water together with a mild, non-d
   thoroughly and air dry. Never bleach or machine dry your rope
   in a rope bag when you are not using it. Keep the rope away fr
   harsh chemicals.

3. Use your rope correctly
   Climbing ropes are designed for climbing only. Do not use t
   any other purposes.

ude a self-lock buckle. The rope and belay device are attached at

also called a gym or club harness. Many gym or club establishments
The alpine harness is a one size fits all. This type of harness is less
s it comes with unpadded leg and waist loops. The harness comes
uckle. The rope and belay device are attached at the same points.

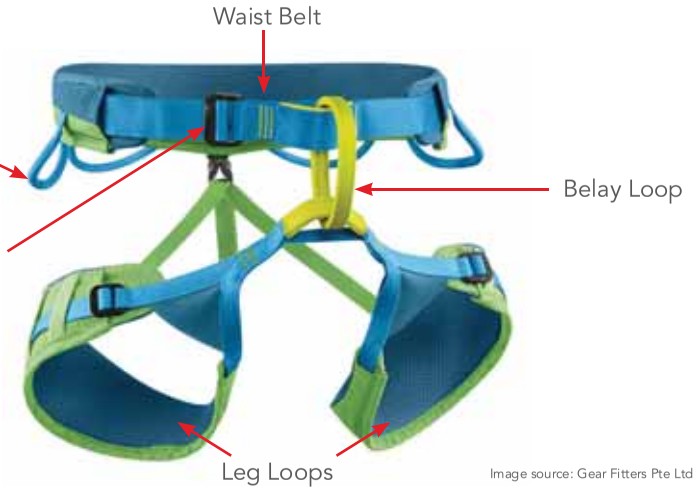


Image source: Gear Fitters Pte Ltd

recognize the type of harness you are using, particularly types of
rope and belay devices are attached. Ask if you are unsure.

ess

elt before you adjust the leg belts; otherwise, the waist belt might
low, resting on the hips, and you could fall out of the harness if

ur own harness before helping others with their harness.
s are doubled back, where appropriate.

4. Children and thin waisted adults should use a full-body harne
shape works with a waistbelt-style harness.
5. There must be at least 4 inches of webbing extending out of
once it has been properly secured and doubled back.

Inspection

1. Inspect your climbing harness regularly for signs of wear and
2. Special attention to be made to the harness stitching and to
3. Retire your climbing harness when it shows visible signs of we
fading or abrasion, or after it has held a severe fall. Over time,
may get slightly fuzzy at the tie-in points. This is acceptable.
wear to the stitching or excessive wear to the tie-in points is

CARABINERS

Types of Carabiners
Carabiners are classified by their shape and gate-type. Each sha
its own advantages and disadvantages. Any carabiner next to y
locking type. For belaying, a pear-shaped, screw gate carabiner

Gates

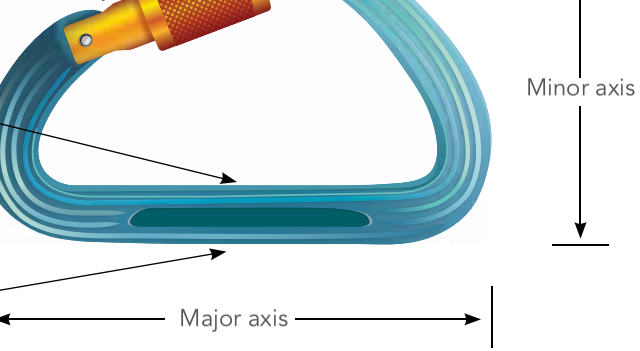

Screwgate


Autolocking gate


Wire gate


Bent gat

Shape



Things to note before using a carabiner

te!
f damage before use.
ions to the gym supervisor immediately.
op carabiners!
ajor axis. Watch out for cross-loading.
for:

r
oses quickly/easily
any locking mechanisms) close freely and completely
bent or missing

rope and pinching the rope. Belay devices can be divided into
depending on which of these two mechanisms are more broadly

Friction Devices	Pinching
Tubular Devices  e.g. Black Diamond ATC Designed for single or double 8.5 mm – 11 mm ropes. 	**Petzl Grigri**  Assisted-braking (also sometimes c self-locking, auto- locking devices) ar down on the rop force is applied belayer catch and They should only recommended rop function well with 

What you MUST know before using a belay device

1. Check the device for damage before using.
2. Report any suspicions to the gym supervisor.
3. Do not throw or drop the device.

Choosing a belay device

1. Compare the diameter of the rope to the belay device to be

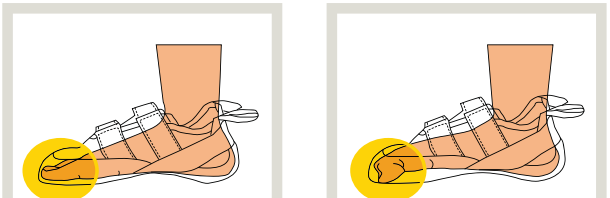
performance climbs. This could result in an issue if you are halfw
El Capitan or in a competition.

Lace-up
These have a more secure fit.

Velcro
These are the most popular for easy fit.

Lace Velcro Slipper

Shoe Fit
It is important to ensure that the chosen footwear fits the user
pressed together so they cannot move. Your toes should feel ti
that you are in pain. If it is painful, your shoes are too small. You
climbing performance with the increased pain. The point is to kee
from slipping, even when they are wet from sweat. This can be
are just tight, but not painfully tight.



what keeps your finger tendon attached along your finger. Many climbers place too much weight on their fingers when crimping in ting in pulley injuries. Common symptoms include pain at the site , difficulty forming a fist (flexing your finger) and stiffness. Pulley reated by resting the finger, icing the finger to reduce the swelling he anti-inflammatory painkillers to help with the pain, avoiding ly avoiding climbing for the time being altogether. Complete however is more serious as self-recovery takes a very long time ot be possible without surgery. Learn to crimp properly by flexing when crimping instead of extending the distal finger joints while oints to avoid pulley injuries.

ommon in climbers due to the nature of the texture of the wall ds. Abrasions can range from superficial to deep. can be treated by just washing with antiseptic tting it air (but keeping it clean) or covering it with sing. Deep abrasions tend to bleed more and may e of pressure to stop the bleeding. Management ould be to place constant pressure on the cloth/tissue. Once the bleeding stops, wash iseptic solution. It is advisable to apply an n the abrasion to prevent any infections re placing a light dressing over the ellowish thick discharge come out visit a doctor as the wound might require oral antibiotics.

uncommon, especially in boulderers when they mp down onto the mat. Landing awkwardly can easily result in ankle mon ligament sprained is the anterior tibia-fibular ligament (ATFL). verity from minor sprains, major sprains, partial tears, to complete nt. First aid would include the usual RICE – Rest, Ice, Compress, pically seen in more serious injuries, and bruising may be seen in

rop knee movements as the knee is not made to rotate, but just to
ion of the knee during a drop knee move can cause the meniscus or
d. Depending on the severity of the injury and how "professional"
equiring complete healing, surgical intervention may be required,
d to be worn post-surgery to allow proper healing of the operation
n also be very helpful in the healing progress.

f muscle injuries

cles are located at the top of your arm, joining your arm to your
novements are typically responsible for straining or tearing rotator
lly when reaching up for a hold at an awkward ankle. Making
like jumping to catch a hold can also overload the rotator cuff
uries to it. Strains can be treated with rest and anti-inflammatories.
eated with additional physiotherapy. Complete tears may require
Injury to the rotator cuff muscle typically affects the range of
der.

y uncommon but possible whether climbing outdoors or climbing
the event of witnessing a climber falling from height, call for
mmediately. The most important step would be to monitor the
thing and circulation (ABC).

reathing or heart is not beating, immediately start CPR and get an
and, if the ABCs are cleared, DO NOT move the climber. This is
y spinal injury, inappropriate movement may aggravate it, and in
io, cause paralysis.

cious, calm the climber and reassure him/her that the ambulance
s any major bleeding, compress the injury with a clean cloth, and
ber.

note the height at which the climber fell from, whether there was
ness, any movement from the climber after the fall, and any other
so that these can be communicated to the paramedics to aid them

Risk management is an on-going process that ensures safety is we
the achievement of safety goals, and minimises the likelihoo
management process involves:

1. Risk assessment.
2. Communication of risks.
3. Review and monitoring of the risk assessment.

Key responsibilities should be clearly assigned to specific peo
risk monitoring and review, communication, and training of te
management. Everyone involved should be informed and awa
standard of the risk management planning, by assigning approp
and review performance is a good practice.

Risk assessment is an integral component of the safety and health
With effective risk management, the potential costs and liabilit
thereby enabling a safer sporting experience. Sport and recrea
physical risk, which varies with the type and timing of the activity,
skill level and number of spectators. Risks are managed thr
likelihood and potential consequences, developing clear actio
response plan. Legal compliance and insurance coverage should

Risk management documentation should include:

1. A comprehensive risk management plan.
2. An incident/accident register.
3. A post review/report.

The management of sports facilities should conduct risk
assessments. This allows the sources of risks to be identified
and reasonably practicable steps taken to eliminate any
foreseeable risk to those involved. Where it is not possible to
eliminate risk, other reasonably practicable measures must be
taken to minimise risk.

Risk assessment can be made simpler with four (4) questions:

of accidents, injuries, and losses.

aving equipment.

.

ential issues with standard operating
actices.

ir infrastructure.

ere the activity is happening.

ssessment and management systems are available on Sport
e: *https://www.sportsingapore.gov.sg/Sports-Education/Sports-ces-and-Useful-Links*

the appropriate measures for risk control to prevent harm or injury. Conducting a risk assessment allows for the identification of hazards present and to develop mitigating measures to reduce the risk to as practically possible. People have a right to be protected from harm which could be otherwise prevented. A risk assessment enables the coach/instructor to:

1. Identify the hazards.
2. Determine the associated risks.
3. Prepare risk control action plan.
4. Determine who is responsible in implementing the mitigating measures.
5. Review the adequacy of the action plan to create a safe environment.

A sample of a risk assessment form is as follow:

Identified Risks	Actions	When	Who
Participant			
Dehydration	Ask participants prior to session. Look out for those sickly or pale looking participants.	Beginning of the session	Instructors /Teachers
Tired and weary	Conducts periodic check every 15 minutes.	After every task	
Slip and fall	Ensure ratio of instructor to participants is 1:10.		
Insect bites and stings	Ensure participants in good condition sneakers/ sports shoes and in sport attire.		
Is he/she appropriately			

quipment before start f session. nsure all equipment in orking condition. einforce need for articipants to constantly heck on their equipment s part of safety. heck on the ratio of udents to equipment.	of the session. Direct attention to equipment during session.	Participants	equipment prior to engaging services is required. Ensure equipment is worn appropriately at all times.
ssess each task and atch with abilities f participants. onduct assessment of articipants. afety briefing prior to sks.	Prior safety briefing.	Participants /Instructors	Keep a look out for any signs of weariness from participants and ensure they are able to carry out the tasks.
ducate participants on nportance of sun block. nsure that they have fficient water breaks. heck for availability f shelter for lightning onditions.	Prior to start of session, call to check Cat status.	Instructors/ Participants	Include this as part of the session to educate participants on the importance of checking the weather, particularly in Singapore where lightning incidence is high.
ecce area and rroundings before ommencement of ctivities. nsure the walls are in ood working condition	Prior to start of each session.	Instructors	Facility check should be conducted early to ensure that necessary work is carried out before start of session.

Process:	RA Member 1:	
Activity Location:	RA Member 2:	Signature:
Original Assessment date:	RA Member 3:	Name:
Last review date:	RA Member 4:	Designation:
Next review date:		Date:

Level	Severity	Description
5	Catastrophic	Fatality, fatal diseases or multiple major inj
4	Major	Serious injuries or life-threatening occupat amputations, major fractures, multiple inju cancer, acute poisoning).
3	Moderate	Injury requiring medical treatment or ill-he (includes lacerations, burns, sprains, minor deafness, work-related limb disorders).
2	Minor	Injury or ill-health requiring first-aid only (i bruises, irritation, ill-health with temporary
1	Negligible	Not likely to cause injury or ill-health.

Level	Likelihood	Description
5	Almost certain	Continual or repeating experience.
4	Frequent	Common Occurrence.
3	Occasional	Possible or known to occur.

4	8	12	16	20
3	6	9	12	15
2	4	6	8	10
1	2	3	4	5

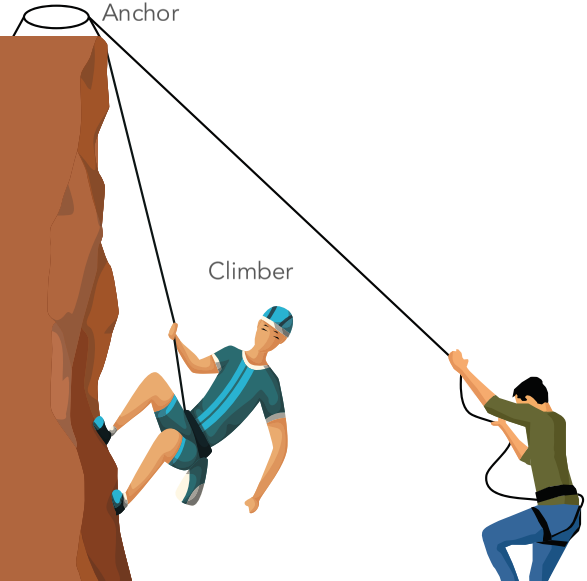
	2. Risk Evaluation				3. Risk Control						
	2a	2b	2c	2d	3a	3b	3c	3d	3e	3f	3g
	Existing Risk Control (if any)	S	L	RPN	Additional Risk Control Measures	S	L	RPN	Implementation Person	Due Date	Remarks
	1.				1.						
	1.				1.						
	1.				1.						

al risk of accidental injuries in sport climbing, as in all other sport,
aken while undertaking the activity.

gate the effects of gravity and falling. Beginner climbers are most
nts. Always use sound judgment; respect climbing dangers; take
qualified SSCMF climbing instructors to learn how to climb safely.
accidents happen because of climber's errors.

re embarking on climbing activities:

- program/course from a qualified SSCMF Instructor
- with warming up exercises
- esses and knots before climbing
- and belay device
- tion to your climbing partners
- s established by the climbing gym/centre
- e attire for your climb that allows a free range of motion



- Check harness
- Check double figure-8 knot
- Check correct length of tail



Climber to Belayer

- Check harness
- Check if ATC is put on properly
- Squeeze check


Climbing Ca
C — On Bel
B — Belay C

C — Climbin
B — Climb C

C — Lower r
B — Loweri

Slack — Rele
Take in — Ta
Watch me! –
Falling! — I'

	Climber	Belayer	Co (Fo
Before climb activity	1) Check harness. 2) Check if ATC is put on properly. 3) Squeeze and check carabiner.	1) Check harness. 2) Check double figure of eight knot. 3) Check correct length of tail.	1)
During climb activity	1) Start climb. 2) Slack if rope is too tight. 3) Take in rope if rope is too loose. 4) Lower climber if climber is coming down.	1) "Climb On" to signal readiness. 2) Monitor climber's rope; give and take-in rope, accordingly, based on climber's movement. 3) Lower climber when asked to.	

SCREENING

utinely complete a pre-participation screening questionnaire prior
ysical activity. A pre-participation screening questionnaire such as
onnaire (GAQ), identifies individuals with known conditions as well
prior history of medical illness, but who have symptoms or a past
as chest pain, breathlessness, fainting, dizziness, or palpitations.
identified, individuals should consult a doctor. As new symptoms
e completion of the questionnaire, such questionnaire should be
year.

regarding the Get Active Questionnaire and how to administer it,
ks below for more details:

Physical activity improves your physical and mental health. Even small amou
are good, and more is better.

For almost everyone, the benefits of physical activity far outweigh any risks. For some individu
Qualified Exercise Professional (QEP – has post-secondary education in exercise sciences and
area – see csep.ca/certifications) or health care provider is advisable. **This questionnaire is int**
you along the path to becoming more physically active.

☐ I am completing this questionnaire for myself.

☐ I am completing this questionnaire for my child/dependent as pa

PREPARE TO BECOME MORE ACTIVE

The following questions will help to ensure that you have
experience. Please answer **YES** or **NO** to each question b
physically active. If you are unsure about any question, ar

YES	NO	
		1 Have you experienced **ANY** of the following (A to F) **within the past**
○	○	**A** A diagnosis of/treatment for heart disease or stroke, or pain/disc in your chest during activities of daily living or during physical ac
○	○	**B** A diagnosis of/treatment for high blood pressure (BP), or a restin
○	○	**C** Dizziness or lightheadedness during physical activity?
○	○	**D** Shortness of breath at rest?
○	○	**E** Loss of consciousness/fainting for any reason?
○	○	**F** Concussion?
○	○	**2** Do you currently have pain or swelling in any part of your body (suc acute flare-up of arthritis, or back pain) that affects your ability to be
○	○	**3** Has a health care provider told you that you should avoid or modify
○	○	**4** Do you have any other medical or physical condition (such as diabe asthma, spinal cord injury) that may affect your ability to be physical

NO to all questions: go to Page 2 – ASSESS YOUR CURRENT PH

URRENT PHYSICAL ACTIVITY

estions to assess how active you are now.

many days do you do moderate- to vigorous-intensity aerobic physical cycling or jogging)? DAYS/ WEEK

oderate-intensity aerobic physical activity (e.g., brisk walking), do this activity? MINUTES/ DAY

r average number of days/week by the average number of minutes/day: MINUTES/ WEEK

elines recommend that adults accumulate at least 150 minutes of moderate- to vigorous-intensity ildren and youth, at least 60 minutes daily is recommended. Strengthening muscles and bones at lts, and three times per week for children and youth, is also recommended (see csep.ca/guidelines).

CE FOR BECOMING MORE ACTIVE

gradually so that you have a positive experience. Build physical activities that you enjoy with a friend, ride your bike to school or work) and reduce your sedentary behaviour

nsity physical activity (i.e., physical activity at an intensity that makes it hard to carry on a meet minimum physical activity recommendations noted above, consult a Qualified Exercise . This can help ensure that your physical activity is safe and suitable for your circumstances.

ortant part of a healthy pregnancy.

f you are not feeling well because of a temporary illness.

ll of the information I have supplied on this questionnaire is correct.
plete this questionnaire again.

ions on Page 1

on below

I answered YES to any question on Page 1

Check the box below that applies to you:

- ☐ I have consulted a health care provider or Qualified Exercise Professional (QEP) who has recommended that I become more physically active.
- ☐ I am comfortable with becoming more physically active on my own without consulting a health care provider or QEP.

f applicable) [Please print] | Signature (or Signature of Parent/Guardian if applicable) | Date of Birth

nal) | Telephone (optional)

Use this reference document if you answered **YES** to any question and you h
health care provider or Qualified Exercise Professional (QEP) about becomin

1 Have you experienced ANY of the following (A to F) within the past

A A diagnosis of/treatment for heart disease or stroke, or pain/ discomfort/pressure in your chest during activities of daily living or during physical activity? ☐ **YES**	Physical activity is likely to be beneficial. If you ha disease but have not completed a cardiac rehabi past 6 months, consult a doctor – a supervised ca is strongly recommended. If you are resuming ph 6 months of inactivity, begin slowly with light- to m activity. If you have pain/discomfort/pressure in y talk to a doctor. Describe the symptom and what
B A diagnosis of/treatment for high blood pressure (BP), or a resting BP of 160/90 mmHg or higher? ☐ **YES**	Physical activity is likely to be beneficial if you have high blood pressure (BP). If you are unsure of your provider or a Qualified Exercise Professional (QEP) taking BP medication and your BP is under good c is recommended as it may help to lower your BP. Y your physical activity level so your medication nee is 160/90 or higher, you should receive medical cle safe and appropriate physical activity.
C Dizziness or lightheadedness during physical activity ☐ **YES**	There are several possible reasons for feeling this worrisome. Before becoming more active, consul identify reasons and minimize risk. Until then, refr of your physical activity.
D Shortness of breath at rest ☐ **YES**	If you have asthma and this is relieved with medic physical activity is safe. If your shortness of breath consult a doctor.
E Loss of consciousness/ fainting for any reason ☐ **YES**	Before becoming more active, consult a doctor to minimize risk. Once you are medically cleared, co Professional (QEP) about types of physical activity
F Concussion ☐ **YES**	A concussion is an injury to the brain that require physical activity while still experiencing symptom lengthen your recovery, and increase your risk for care provider will let you know when you can star active, and a Qualified Exercise Professional (QE

ent if you answered **YES** to any question and you have not consulted a
ualified Exercise Professional (QEP) about becoming more physically active.

ve pain or swelling in any part of your body (such as e flare-up of arthritis, or back pain) that affects your lly active?	☐ **YES**
consult a health care provider. Otherwise, keep joints healthy and reduce pain by moving through the entire pain-free range of motion. If you have hip, knee or ankle pain, choose swimming or cycling. As the pain subsides, gradually resume your normal physical activities before the flare-up. Consult a Qualified Exercise Professional (QEP) in follow-up to help you vent or minimize future pain.	
rovider told you that you should avoid or modify certain tivity?	☐ **YES**
ealth care provider. A Qualified Exercise Professional (QEP) will ask you about any pecific advice for physical activity that is safe and that takes your lifestyle and health ccount.	
her medical or physical condition ancer, osteoporosis, asthma, spinal cord injury) r ability to be physically active?	☐ **YES**
ey have a medical or physical condition that physical activity might be unsafe. In fact, elp to manage and improve many conditions. Physical activity can also reduce the risk l Exercise Professional (QEP) can help with specific advice for physical activity that is safe history and lifestyle into account.	

E for your YES response, go to Page 2 of the
e – ASSESS YOUR CURRENT PHYSICAL ACTIVITY

ANT ADDITIONAL INFORMATION ON COMING MORE PHYSICALLY ACTIVE?

cations ▸ csep.ca/guidelines

gender, or physical ability.

2. Recognise that your athletes can contribute by providing pos
training methods and how best performance during training
could be optimised. Be a good listener when occasions for s
3. Do not disclose confidential information. Disclosure of such i
only be made with the consent of those who requested conf
4. Be sensitive to the feelings of your athletes when providing f
training progress and performance during competition. Criti
not be directed at the athlete; instead, it should be on your a

Responsible Coaching

1. Be responsible and upskill your coaching expertise regularly
in courses, conferences, workshops and resources.
2. Prepare a well-planned and sound training programmes and
manner that would benefit all your athletes.
3. Recognise the limits of your knowledge and collaborate with
practitioners. Where appropriate, refer your athletes to a mo
specialist.
4. Advise your injured athlete to seek further medical treatment
appropriate recovery plan whenever possible. When decidin
athlete's ability to continue training or competing, do conside
and general well-being.
5. Ensure that training and competition venues meet with minir
and that your athletes are properly attired.
6. Avoid sexual intimacy with your athlete. Any physical contact
should be only necessary and during appropriate situations.

Integrity in actions

1. Be honest and sincere when communicating with your athlet
hopes to your athlete.
2. Inform a fellow coach as and when you are working with you
3. Your coaching qualifications and experience should be accur

	Coach/Instructor
	1. Create and maintain a health and safety policy with risk assessments and emergency plans. 2. Plan the training programme that is appropriate for the ability and state of development of trainees. 3. Require all participants, schools and their parents or guardians, to sign an indemnity form. 4. Have a qualified SSCMF instructor certification, with a valid first aid and CPR/AED training certifications. 5. Have a first-aid kit fully stocked with an adequate supply of the correct medical equipment and supplies within sight. 6. Be prepared to summon professional medical help by having an emergency action plan. 7. Check the climbing area to make sure it is safe by removing hazards – for example, obstacles, obstructions, or equipment left by other gym users. 8. Ensure that there is sufficient space for climbers/ belayers/spotters. 9. Be aware of any medical conditions or physical limitation of climbers. 10. Ability to adapt moves for those with injuries or disabilities. 11. Check equipment like harness, shoes, belay device and ropes are well put-up. 12. Ensure that the trainees are fit, physically, and mentally, for climbing. 13. Ensure that trainees maintain the highest standard of personal hygiene including keeping fingernails short and grooming hair neatly. 14. Forbid the use of objects such as eyeglasses, rings, necklaces, watches, bracelets, and earrings. 15. Ensure that changing room is clean and dry.
	1. Conduct a proper warm-up before the start of the climbing activity. 2. Provide sufficient hydration breaks in between climbs. 3. Allow adequate rest in between climbs based on the physical capacity of the climbers. 4. Increase work intensity gradually.
	1. Conduct proper cool-down.

Before climb activity	1. Climbers are adequately qualified Singapore National Climbing Stan 2. Proper bookings including signin are made.
During climb activity	1. Ensure that climbers adhere to rules and regulations including all
After climb activity	1. Climbers check out. 2. All equipment cleared by climbers 3. Check all returned equipment for

Partner in Sport

Sport SINGAPORE

tote board
Giving Hope
Improving Lives.

3 Stadium Drive
Singapore 397630

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