

Attn: The Person-in-Charge Pass-It-On @ The Helping Hand

819, Upper Serangoon Road, Singapore 534678 Tel: 6283-2204 ext: 108 Fax: 6283-3748 passiton@thehelphand.org

LETTER OF UNDERTAKING FOR PASS-IT-ON ACCOUNT HOLDERS

Pass-It-On provides its service to your organization, subject to the following Terms of Service ("TOS"),

In consideration of your use of the services provided by Pass-It-On, on behalf of your organization, you agree

- 1) ensure that the information provided about you is true, accurate, current and complete and that any updates will be communicated to the staff of Pass-It-On at The Helping Hand.
- 2) indemnify and hold Pass-It-On, and its affiliated subsidiaries or agents, harmless from any claim or demand, including reasonable legal fees, made by any third party due to, and or arising out of the content you submit, post, transmit or make available through the service, your use of the service, your connection to the website, your violation of the TOS, or your violation of any rights of another.
- 3) be responsible for maintaining the confidentiality of the password and account, and are fully responsible for all activities that occur under your account.
- 4) notify Pass-It-On of any unauthorized use of your password or account, or any breach of security.
- 5) ensure that you exit from your account and clear the cache at the end of each session.

Discretion of Pass-It-On

- We reserve the right to remove your registration from the website, if it is deemed necessary and appropriate by the Administrators of Pass-It-On.
- Pass-It-On reserves the right at any time to modify or discontinue, temporarily or permanently, its service (or any part thereof) with or without notice.
- Pass-It-On shall not be liable to your organization or to any third party for any modification, suspension or discontinuance of this PIO Service.

I have read and understood the terms a	and conditions of the Pass	-It-On services. I, (Mr / Ms)
(na	me),	(designation), with
	(name of org	anization) hereby agree to the
terms mentioned above & agrees to keep	Pass-It-On updated of my	status in the organization and
allow Pass-It-On to cease any access once	I leave the organization.	
(a	all fields below are compulsory)	
Organization Stamp	Date	Signature
Organization Email	DID/Ext	Mobile (required)