



ENROLLMENT FORM 課程報名表

Course Information 課程資料

Course Name (課程名稱): 第五期一級幼兒運動教練證書課程 (截止日期: 2018 年 10 月 12 日) Fee (學費): HK\$2,900

Personal Information 申請人資料

Name (姓名) _____
 English (英文) _____ Chinese(中文) _____

Membership No. (會員編號) _____ HKID Card No. (身份證號碼) _____

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Sex (性別) _____ Age (年齡) _____ Date of Birth (出生日期) _____

Address (地址) _____

Tel No. (聯絡電話) _____ Mobile (手機) _____ Home (住宅) _____
 Fax No. (傳真號碼) _____ E-mail (電郵地址) _____

Related Experience 有關幼兒/兒童運動的經驗

- (1) Practical Experience (實務經驗) [Full time 全職/Part-time 兼職] _____
- (2) Attend courses of our Association (曾修讀本會舉辦之課程) (Yes 是 / No 否)
 Please specify (請註明): _____
- (3) Others (其他): _____

Remarks: Please also apply as our individual member before applying this course. Please contact Secretariat at 2504-8246 for further information.

備註: 如非本會會員, 請一併申請成為本會個人會員, 否則不接納報名, 詳情請致電本會查詢 電話: 2504-8246

All the personal data will keep confidential and will only be used in the application procedure of the events organised by our Association. For any change of your personal data, please contact at 2504-8246.
 所提供的資料只用於本會與合辦機構的康體活動報名事宜及活動之用。在遞交表格後如欲更改或查詢你申報的資料, 可與本會職員聯絡。

Declaration

I, _____, declare that all the personal data are true and correct. I am aware that my participation in the Hong Kong China Bodybuilding And Fitness Association event(s) exposes me to a risk of personal injury and I agree to hold harmless Hong Kong China Bodybuilding And Fitness Association, their Executive Committee, employees and subsidiaries, the presenters and all the event staff from any and all liability arising from this course including, but not limited to, muscle strains, tears, pulls, broken bones, death and any and all illness, ailments or loss of personal property. I understand the risks arising from the participation of this course and attest that I am in sound physical condition. I also understand that I may be videotaped, audiotaped and photographed during the course and Hong Kong China Bodybuilding Association may use my images for any and all uses without my prior consent. I further agree to all conditions of registration, including but not limited to, the policy of no refund, no extension & no make-up classes.

聲明

本人, _____, 謹此聲明在本表格內所提供之資料皆正確無誤, 並擁有良好健康狀況及在參加課程活動時如有任何特殊情況出現(如肌肉扭傷、撕裂、拉傷、骨折、意外、死亡、其他疾病或遺失私人財物等), 中國香港健美總會及其執行委員、員工及所有工作人員均無需負上任何法律或金錢責任, 本人更同意中國香港健美總會可保留更改課程活動之日期、時間、內容錄影、錄音及拍攝等權利。本人亦得知課程一經報名, 不設退款、轉班、補課、延期考試或由他人代替參加。謹此同意及明白章程所列之內容和條款及願意遵從。

Signature 申請人簽署: _____ Date 日期: _____

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Amount (金額): _____ Received Date(日期): _____
 Cash 現金 _____ (Bank 銀行 _____)
 Cheque 支票/Cheque No. 支票號碼 _____

Issued by (經手人): _____ Invoice No.: _____