

2017 - 2018 年度曲棍球成人訓練班

Hockey Training Course for Adults 2017 - 2018



對象: 歡迎 18 歲或以上人士參加

班別	日期	星期	時間	地點	費用	名額	截止日期	
Class	Date	Day	Time	Venue	Fee	Quota	Deadline	
初級班 Beginner Course								
	2, 9, 16, 23, 30 /09/2017	六		京士柏曲棍球場			額滿即止	
			8:30pm - 10:00pm	King's Park Hockey Ground	\$130	45	First-Come	
	7, 14, 21 /10/2017	Sat					First-Served	
	4 11 19 25 /11/2017	六		六 L 丛 丛 相 玟 坦			額滿即止	
1 11	4, 11, 18, 25 /11/2017		8:30pm - 10:00pm	京士柏曲棍球場 King's Park Hockey Ground	\$130	45	First-Come	
	2, 9, 16, 23 /12/2017	Sat	1 1				First-Served	
中級班 Intermediate Course								
	6, 13, 20, 27 /1/2018	,		之 1141日4日			額滿即止	
	3, 10, 24 /2/2018	六 Sat	8:30pm - 10:00pm	京士柏曲棍球場	\$140	40	First-Come	
	3 /3/2018			King's Park Hockey Ground			First-Served	
	10, 17, 24 /3/2018						額滿即止	
II	7, 14, 21, 28 /4/2018	六	8:30pm - 10:00pm	京士柏曲棍球場	\$140	40	First-Come	
		Sat	8.30piii - 10:00piii	King's Park Hockey Ground	φ140	40	First-Served	
	5 /5/2018						rust-served	

^{*}香港曲棍球總會有權利就訓練日期及時間安排作出調動

which I may suffer in this activity.

申請人簽署: Signature of Applicant:

請填妥報名表格(報名表可自行複印),連同報名費(支票付款,抬頭請寫上 "The Hong Kong Hockey Association",並在支票背後寫上參 加者姓名及班別,請勿郵寄現金)寄:九龍衛理道二至六號,京士柏曲棍球場,行政大樓一樓,香港曲棍球總會(蘇先生)收。或

轉賬至 HSBC 658-117650-838 (香港曲棍球總會)。填妥報名表格必須連同銀行收據電郵至 jackyso@hockey.org.hk。**如轉帳付款欠缺銀行 收據證明,報名申請將視為不成功。

Entry:

Complete the application form below and send it with a cheque and make payable to "The Hong Kong Hockey Association". Please write the name & class code on the back of the cheque and send to Jacky So, The Hong Kong Hockey Association, 1/F, Administration Block, King's Park Hockey Ground, 2-6 Wylie Road, Kowloon. OR

Transfer payment to HSBC 658-117650-838 (The Hong Kong Hockey Association). Please attach bank in slip together with application form and

	**	wn as unsuccessful in absence	1 2				
		名表 Application Forn					
請選擇課程及班別:	初級Ⅰ班:□	初級Ⅱ班:□	中級Ⅰ班:□	中級Ⅱ班:□			
Please select the course:	Beginner Course I	Beginner Course II	Intermediate Course I	Intermediate Course II			
姓名 Name:	(中文	Chinese)	(英文 English)				
出生日期(月份/年份) Date of Birth (Month/Year): 性別 Gender:							
身份證號碼(英文字母及頭	4 位數字) HKID (First cha	racter and 4 digits):					
聯絡電話 Tel: 電郵 Email:							
(請用正楷清楚填寫,報名	事宜將以電郵確實,不另	發通知 Please use BLOCK le	etters, acceptance will be sent	by email only)			
個人經驗 Personal experien	nce						
□從未接觸過曲棍球 New to hockey □曾經參與曲棍球訓練班 Took hockey lessons before							
□有比賽經驗 (包括參與2	支誼賽,盃賽或聯賽等) Play	ed hockey match before (incl	uding friendly, league and/or	cup matches)			
(如本人於活動時遇上緊急	事故,請致電In case of e	mergency, please call		tact Person)			
聲明 Declaration							
我聲明:本人明白參	加者如在以上活動有任何打	員傷及意外,香港曲棍球總 [,]	會及有關活動之機構不須負	上任何責任。			

I accept that The Hong Kong Hockey Association, its servants and employees, and the coaches shall not be liable for any injuries or death

日期 Date:

^{*}The Hong Kong Hockey Association reserve the right to amend the date and time of the training courses 報名辦法: