

Organized by



# 曲棍球訓練班

## Hockey Training Programme

Co-organized by



班別 Class	年齡 Age	活動 Event	日期 Date	時間 Time	地點 Venue
TPH5	3-12	訓練班 Training	5, 12, 19, 26 / 1 16, 23 / 2 2, 9, 16, 30 / 3	09:30-11:00	廣福球場 (近王肇枝中學, 入口設於南運路) <b>Kwong Fuk Football Ground</b> (Next to Norwegian International School, entrance from Nam Wan Road)
		比賽 Tournament	3 / 3 23 / 3	08:00-14:00 之間 (確實時間待定, Actual Schedule TBC)	九龍木球會 <b>Kowloon Cricket Club</b> 跑馬地遊樂場 <b>Happy Valley Recreation Ground</b>

1. 教練會根據年齡分組別教授 **Coaching will be done separately for different age groups.**
2. 課程為 (12 節) 港幣 **720 元**。HK\$**720** for the course (12 sessions).
3. 大埔體育會會員享有港幣 **20 元** 優惠, 請於 <http://www.tpsa.org.hk/> 下載報名表或 **前往大埔體育會李福林體育館詢問處報名 (地址: 安祥路 2 號)**。Tai Po Sports Association members can enjoy a HK\$**20** discount, please download application form from <http://www.tpsa.org.hk/> or **apply at Tai Po Sports Association Li Fook Lam Indoor Sports Centre (Address: 2 On Cheung Rd, Tai Po)**

\*在班上會提供球棍及球, 上課只需穿著舒適運動服及鞋。Sticks and balls are provided during the classes, just come in your comfy sports clothings and shoes.

### 網上報名 Application Online:

掃瞄二維碼進行網上報名 Scan the QR code to apply online



查詢 Enquiries: [jackyso@hockey.org.hk](mailto:jackyso@hockey.org.hk).

### 報名表 Application Form

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 character 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 letters, acceptance will be sent by email only)

如遇緊急事故, 請聯絡 Emergency Contact: \_\_\_\_\_ 電話 Tel: \_\_\_\_\_

### 聲明: (參加者未滿十八歲, 必須由家長/監護人填寫)

#### Declaration (To be completed by parents/guardians for participants under the age of 18)

這證明本人/參加者是自願參加此活動, 身體狀況良好, 並願意自己承擔所有責任。本人/參加者亦會謹遵主辦機構之一切活動規則及決定。本人/參加者一旦因在活動過程中受到任何財物損失、受傷或致死亡時, 主辦機構及有關協辦機構均毋需負上任何責任。本人/參加者亦願意授權予主辦機構在毋需經審查而可使用參加者之肖像作為日後活動籌辦及推廣之用。

I certify that I am/the participant is physically fit and understand that I am /the participant is participating in the event at own risk and responsibility. I / the participant hereby explicitly agree to abide by all rules set by the Organizer and discharge the organizer and any other individuals or organization connected directly or indirectly with this course from the responsibility in the course of loss of property, injury or death incurred during, as a consequence of or while travelling to or from the course. I am/the participant is willing to authorize the organizer to use my/the participant's portraits for promotional use without prior notice.

參加者/家長/監護人姓名 Name of Parent/Guardian of the Applicant: \_\_\_\_\_ 簽署 Signature: \_\_\_\_\_

緊急聯絡電話 Emergency Contact No.: \_\_\_\_\_ 參加者簽署 Signature of Applicant: \_\_\_\_\_

備註: 如因天氣、場地或其他不可預計情況, 香港曲棍球總會有權就訓練日期及時間安排作出調動。閣下所提供的資料只用於香港曲棍球總會所舉辦的活動之用。在遞交申請表後, 如欲更改或查詢閣下申報的個人資料, 可與本會職員聯絡。如不欲收取曲棍球總會的其他課程或活動資訊, 請於方格內劃上√號 。

Remarks: The Hong Kong Hockey Association reserves the right to amend the date and time of the training courses in the event of inclement weather, pitch conditions or other unexpected circumstances. Information provided will only be used for events organized by the HKHA. Please contact us if you have questions. If you do not wish to receive any further information on our courses or events, please put a tick in this box .