

# Level 3 Water Polo Technical Official Certificate Course 2024-25

## 三級水球裁判訓練班 2024-25

(Organized by HKGSA / 由中國香港游泳總會主辦)

### APPLICATION FORM 報名表

**Note:** The information provided will only be used for the enrolment and promotion of recreation and sports activities organized by our Association and co-organizing parties. Request for correction of or access to personal data after submission of this form, should be made in writing to the Association.

備註：所提供的資料只供本會或有關機構作推廣、紀錄及呈報之用。如欲更改或查詢你申報的個人資料，須向本會作出書面申請。

**Please fill in "BLOCK LETTERS"** 請以“正楷”填寫

Name 姓名：(English) \_\_\_\_\_ (中文) \_\_\_\_\_

Affiliated Club 屬會(if any,如有)：\_\_\_\_\_ Gender 性別：\_\_\_\_\_

Date of Birth 出生日期(MM/YY)：\_\_\_\_\_ - \_\_\_\_\_ Age 年齡：\_\_\_\_\_

HKID 身份證號碼：\_\_\_\_\_ XXXX (First 4 characters, e.g. A123 or AB12 頭四個英文字母連數字)

Any Water Polo Technical Official experience? / 有否水球裁判經驗?.....\_\_\_\_\_

(If Yes, please state / 如有，請簡略說明：\_\_\_\_\_)

Contact Tel 聯絡電話：(1) \_\_\_\_\_ (2) \_\_\_\_\_

Fax 傳真：\_\_\_\_\_ E-mail 電郵：\_\_\_\_\_

Contact Address

聯絡地址(英文)：

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I, \_\_\_\_\_ (Applicant's name), am physically fit without any physical defect and suitable to participate in the above activity. Organizer shall not be liable for any injury that may arise from participating in this activity.

本人(申請人姓名)\_\_\_\_\_的健康及體能良好並適宜參與上述訓練課程。若因健康及體能欠佳而引致受傷，主辦機構則無需負任何責任。

Name of Applicant  
申請人姓名

Date  
日期

Applicant's Signature (Signed by  
Parent if Aged under 18)  
申請人簽署(未滿 18 歲需由家長簽名)

**Please return this form together with 請交回此表格連同：**

- **HK \$350.00 - A crossed cheque made payable to "HKGSA".**  
**劃線支票(抬頭請寫 "HKGSA")**
- **+ A self-addressed, pre-stamped envelope if by mail 貼有足夠郵資的回郵信封一個(如郵寄)**

~~~ End 完 ~~~