



香港網球總會

HONG KONG TENNIS ASSOCIATION

Room 1021, Olympic House, 1 Stadium Path, So Kon Po, Causeway Bay, Hong Kong

Tel: 25048266 Fax 28948704 [www.tennishk.org](http://www.tennishk.org)

**talenTG**roup

You are cordially invited to join the **TG Movie Night 2010/11**

**Movie: Legend of the Guardians**  
**守護者傳奇**

Official website: <http://www.legendoftheguardians.com>



Date: 23 Oct 2010 (Sat)

Show Time: 7:30pm

Duration: 97 mins

Grading: IIA

Venue: The Grand Cinema (Map is attached)

Fee: Free for all PNTS / TG / TID players  
HK\$85 per parent/guardian  
(Each player can bring max. 1 parent/guardian)

Registration is on First come first served. Email Confirmation will be sent on or before 21 Oct. P

\* F&B is available onsite at your own expense

**Entry Deadline: 20 Oct 2010 (Wed)**



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Address:

2/F, Elements, 1 Austin Road West, Kowloon (Kowloon Station, MTR)

Website: [http://www.elementshk.com/eng/index\\_popup.php](http://www.elementshk.com/eng/index_popup.php)





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Fax to 28948704

OR

Email to [olivia@tennishk.org](mailto:olivia@tennishk.org)

Consent Form

家長同意書

Talent Group - Movie Night 2010/11

傑青班 – 電影日 2010/11

Name of Participant 參加者姓名 \_\_\_\_\_

Date of Birth 出生日期: \_\_\_\_\_

Group 組別: PNTS / 1 / 2 / 3 / Tournament\* Training Venue 訓練場地: SKM / HKTC/CB\*

\* Please circle the appropriate.

Email: \_\_\_\_\_

Tel: \_\_\_\_\_

I will come with

(1) \_\_\_\_\_ (Relationship: \_\_\_\_\_)

\*Registration is on first come first serve basis. Priority will be given to the player and the first parent.

**Parent / Guardian should be aged 18 or above.**

家長/監護人須為十八歲或以上人士

I [ \_\_\_\_\_ ] (holder of Hong Kong Identity Card No. [ \_\_\_\_\_ ] acknowledge that I am the natural and lawful parent of the Player [ \_\_\_\_\_ ] ("the Participant") and I understand and agree that the Player will take part in the Hong Kong Tennis Association ("HKTA") - TG Movie Night 2010/11 as indicated in the enrolment form at his/her own risk and hereby exonerate and indemnify the HKTA and its staff from and against any proceedings, claims and demands whatsoever arising from any injuries or sickness howsoever sustained or contracted by the Player during his/her participation in the event.

本人[ \_\_\_\_\_ ](身份證號碼: \_\_\_\_\_) 承認本人為[ \_\_\_\_\_ ] ("參加者")之家長/合法監護人及明白參加者須自行承擔參與香港網球總會 – 傑青電影日 2010/11 之風險並藉此免除向香港網球總會及其職員因活動中發生意外或受傷索償及提出訴訟之權利。

Parent's / Guidance Signature 父母或監護人簽署: \_\_\_\_\_

Emergency Contact No. 緊急聯絡電話: \_\_\_\_\_

Date 日期: \_\_\_\_\_



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**talenTG**Group

## TG Movie Night 2010/11

### Payment From

**Name of player:** \_\_\_\_\_ TG / Talent ID\*

**Venue:** HKTC / SKM / KT / CB\*

**Group:** PNTS / 1/ 2/ 3/ A/ B/ C\*

\* Please circle the appropriate.

#### Payment 付款

by Credit Card 信用卡

Credit Card Type 信用卡類別:  Visa  Master 萬事達咭

Credit Card Issuing Bank 發咭銀行名稱: \_\_\_\_\_

Card Holder's Name 持咭人姓名: \_\_\_\_\_

(as appeared on credit card 與信用卡相同)

Card No. 信用卡號碼:

Card Expiry Date 信用卡到期日:

(Month 月)

(Year 年)

Card Holder Signature 持卡人簽署: \_\_\_\_\_ Date 日期: \_\_\_\_\_

(as appeared on credit card 與信用卡相同)

#### Terms and Conditions: -

I hereby agree that the HKTA has the right to charge my credit card account for the Talent Group Movie Night fee as agreed upon by HKTA and myself. **The fee will be charged once the confirmation has sent.**

by Cheque 支票