

## Tournament Withdrawal Form 退出比賽通知書

- 1. Players must inform HKTA at least 24 hours prior to the match by returning this form.**  
如球員退出賽事，必需於該場賽事 24 小時前將表格交回香港網球總會。
- 2. If a player withdraws for medical reasons, no demerit points will be given and ranking points will be awarded. A Doctor's certificate must be submitted to HKTA within 3 days of the match.**  
如參賽球員因身體狀況欠佳 (如受傷、疾病...等) 原因而退出，必需在該場賽事之三日內遞交醫生證明，本會不會扣除紀律分數及排名分數。
- 3. No refunds will be made if the player withdraws the event after the entry deadline.**  
如在報名截止日期後退出賽事，本會恕不退款。

*Please use Capital Letters 請以正楷填寫*

賽事名稱  
Name of Tournament: \_\_\_\_\_

賽站 (如有)  
Competition (if applicable): \_\_\_\_\_

球員姓名  
Player(s) Name: \_\_\_\_\_

參賽項目  
Event entered: \_\_\_\_\_

賽事日期  
Date of match: \_\_\_\_\_

退出日期  
Date of Withdrawal: \_\_\_\_\_

退出原因  
Reason For Withdrawal: Injury:  受傷  疾病  Illness:  \*\*私人理由  Personal Reason:  \*\*其他  Other:

\*\*請註明

Please Specify \*\* \_\_\_\_\_

有否附上醫生證明文件?  
Is Doctor's Certificate attached with this form? YES  有  NO  否

球員簽署  
Signature of Player: \_\_\_\_\_  
(Print Name 姓名) (Signature 簽名) (Date 日期)

\*家長/監護人簽署  
\*Signature of Parent / Guardian: \_\_\_\_\_  
(Print Name 姓名) (Signature 簽名) (Date 日期)

\* For Junior Player Only 只限青少年球員

Please Return to 請遞交至:

地址: 銅鑼灣掃桿埔大球場徑一號奧運大樓 1021 室  
Address: Room 1021, Olympic House, 1 Stadium Path, So Kon Po, Causeway Bay, Hong Kong  
傳真 Fax: 2894 8704  
電郵 Email: tournament@tennishk.org