



中國通海金融紅球挑戰賽 (賽站八) – 報名表

Tonghai Financial Mini Red Challenge (Comp 8) – Enrollment Form

日期 Date : 14th Oct 2021

開始時間 Starting time : 0900 (取錄名單於 10 月 4 日公佈 及 實際報到時間於 10 月 7 日公佈)

Acceptance list & Reporting time will be released on 4th and 7th Oct respectively)

地點 Location : 香港網球總會中心, 九龍仔公園 HKTA Tennis Centre, Kowloon Tsai Park

支票抬頭: 香港網球總會有限公司 Cheque Payable to: The Hong Kong Tennis Association Limited

參加者英名姓名 English Name : 姓氏 Last Name _____ 名字 First Name _____

出生日期 Date of Birth : (DD/MM/YYYY) _____ 年齡 Age : _____ 性別 Gender : _____

手提電話 Contact No : _____ 電郵 Email : _____

地址 Address : _____

曾參加網總計劃 Joined HKTA Programme : 有 YES / 沒有 NO 球齡 Number of year(s) playing : _____

曾參加網總計劃名稱 Name of Programme : _____

支票郵寄至香港網球總會中心 九龍仔公園 延文禮士道13號 Please send the cheque to HKTA Tennis Centre, Kowloon Tsai Park, 13 Inverness Road, Kowloon City

支票號碼 Cheque No: _____ 支票銀行 Cheque issuing Bank: _____

信用卡號碼 Credit Card : _____ 有效日期 Expiry Date : _____

持卡人姓名 Cardholder's name : _____

持卡人簽署 Signature of the cardholder : _____

I hereby agree that the HKTA has the right to charge my credit card account for the entry fee of Tonghai Financial Mini Red Challenge.

聲明 Declaration:

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訓練班之風險並藉此免除向香港網球總會及其職員因訓練中發生意外或受傷索償及提出訴訟之權利。 本人已知悉及明白 (1) 本人所提供之資料會被用作報名及總會與合辦機構、其他授權機構、合作公司所籌辦活動推廣之用;(2) 就(1)所指, 資料會向有關附屬公司、代理、承辦商及/或其他聯繫之人仕公開;(3) 本人有權就個人資料私隱條例第 486 章 之規定索取及更改本人之個人資料並;(4) 本人可聯絡總會索取或更改本人 之個人資料, 同時總會有權就本人之要求收取相關費用;(5)本人同意總會於訓練/活動過程中, 進行拍攝及錄影訓練/活動的情況, 以作日後訓練/活動檢討及推廣之用。我已細閱並明白於網頁上之報名須知。 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”) tennis training 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 however sustained or contracted by the Player during his/her participation in the Programme. I acknowledge and understand that:- (1) the information provided by me will be used for the purposes of enrolling and promoting the activities organized by the Association, co-organizing parties, and/or other authorized parties or partnering companies in connection with the delivery of the said activities; (2) the information may be disclosed to the subsidiaries, agents, contractors, sub-contractors and/or affiliates of the persons mentioned paragraph (1) and/or other relevant parties for the purposes mentioned in paragraph (1); (3) I have the right of access and correction with respect to my personal data in accordance with the provisions of the Personal Data (Privacy) Ordinance (Cap.486) and; (4) I may contact the staff of the Association for accessing or correcting my personal data and the Association is entitled to impose a fee on me for complying with a data access request;(5) By participating in the event/course, I agree to allow HKTA and /or the co-organizing parties to use the images taken during the lesson/event for future promotional and archival purpose. I read and understand the terms & condition posted on the HKTA website. *此聲明以英文版為本

家長/合法監護人姓名 :
Parent's/ Guardian's Name: _____

家長/合法監護人簽署 :
Parent's/ Guardian's Signature: _____