

\*ONE form for each participant. 每一張授權書只適用於一位申請者

Player's Name 球員名稱: \_\_\_\_\_(Eng) \_\_\_\_\_(中)  
Programme Applied 申請課程: National Training Squad 2025/26  
Applicant's HKID / Birth Cert. No. 申請者身份證/出世紙號碼: \_\_\_\_\_(\_\_\_\_)  
Contact No. 聯絡電話: \_\_\_\_\_ Mobile 手提: \_\_\_\_\_

### Credit Card Payment Authorization Form 信用卡繳費授權書

Credit Card Type 信用卡類別:  Visa  Master 萬事達卡  
Credit Card Issuing Bank 發咭銀行名稱: \_\_\_\_\_  
Card Holder's Name 持卡人姓名: \_\_\_\_\_ (as appeared on credit card  
與信用卡相同)

Card No. 信用卡號碼: 

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Card Expiry Date 信用卡到期日: 

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 (Month 月) 

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 (Year 年)

Card Holder Signature 持卡人簽署: \_\_\_\_\_  
(as appeared on credit card 與信用卡相同)

### Terms and Conditions 條款與規章

- I hereby agree that the HKCTA has the right to charge my credit card account for the National Programme training fee every month during the period of Sep 2023 to August 2024 as agreed upon by HKCTA and myself. The recurring transaction will not be terminated until the HKCTA has been informed by my written notification of service termination one month in advance. No refunds will be made if HKCTA do not receive any written notification of service termination **one month in advance**. **The monthly training fee will be charged by the last week of preceding month from Sep 2025 to Aug 2026**. I agree the validity of this agreement will continue after the expiry date of the credit card account provided above.
  - This authorization shall have effect until my further notice.
  - I confirm that my signature(s) on this authorization form is the same as my specimen signature(s) for the operation of my credit card account to be credited for the transfer(s).
  - I agree that any written notice of cancellation or variation of this authorization which I may give to the HKCTA shall be given at least 7 working days prior to the date on which such cancellation/variation is to take effect.
- 本人同意中國香港網球總會從本人上述之信用卡戶口扣取未來港青隊之學費，直至本人之信用卡有效期到期為止。如要退出訓練/停止過數，**本人必須於訓練前 1 個月提交書面通知書**。如未能於訓練前 1 個月提交書面通知，中國香港網球總會將不會安排退款。**每月之訓練費用將由 2025 年 9 月至 2026 年 8 月期間，於上個月的最後一個星期內從上述之信用卡戶口扣除。**
  - 此授權書將繼續生效直至本人另行通知。
  - 本人確認此授權書上的簽署與信用卡帳戶之簽署式樣相同。
  - 本人明白如本人需更改或終止此授權書，應於生效日期前最少七個工作天以書面通知中國香港網球總會。

本中文版僅供參考，若中、英版有任何矛盾或歧異，概以英文版為準。

Signature 簽署: \_\_\_\_\_ Date 日期: \_\_\_\_\_  
Email: [charling.cheung@tennishk.org](mailto:charling.cheung@tennishk.org) Tel: (852) 2987 7912 Fax: (852) 2338 7749 Website: [www.tennishk.org](http://www.tennishk.org)