



香港殘疾人奧委會暨傷殘人士體育協會

Hong Kong Paralympic Committee & Sports Association for the Physically Disabled (HKPC&SAPD)

地址：新界沙田美林邨美楓樓B座地下141-148室

Address: Unit 141-148, G/F, Block B, Mei Fung House, Mei Lam Estate, Shatin, N.T.

電話 Tel.: 2602-8232 傳真 Fax: 2603-0106 電郵 Email: [selection@hkparalympic.org](mailto:selection@hkparalympic.org)

網頁 Website: [www.hkparalympic.org](http://www.hkparalympic.org)

## 新秀運動員招募 Young Athletes Recruitment 報名表格 Enrollment Form

### 個人資料 Personal Information

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

性別 Gender: 男 Male 女 Female 出生日期 Date of Birth: \_\_\_\_\_ 年 Year \_\_\_\_\_ 月 Month \_\_\_\_\_ 日 Day  
(參加者必須於2017年10月8日年滿8歲及不超過25歲)

年齡 Age: \_\_\_\_\_ (Participant must be aged between 8 and 25 years old on 8 October 2017)

地址 Address: \_\_\_\_\_

聯絡電話 Contact No.: \_\_\_\_\_ 電郵地址 Email Address: \_\_\_\_\_

職業 Occupation: \_\_\_\_\_ 就讀學校(如適用) Current School (if applicable): \_\_\_\_\_

### 參與運動項目 Sports Enrollment

請根據殘疾類別選擇合適運動項目，每位參加者最多只能選擇2個運動項目（請在適當方格內加上「✓」號）。  
Please choose suitable sports according to the types of disabilities. Each participant can choose a maximum of 2 sports  
(Please ✓ as appropriate).

運動項目 Sports	射箭 Archery	田徑 Athletics	羽毛球 Badminton	硬地滾球 Boccia	游泳 Swimming	乒乓球 Table Tennis	保齡球 Tenpin Bowling	
殘疾類別 Types of Disabilities								
脊髓損傷 Spinal Cord Injury				不適用 N/A				
小兒麻痺 Poliomyelitis								
截肢 Amputee								
腦癱(痙攣) Cerebral Palsy	不適用 N/A						不適用 N/A	
視障 Visual Impairment			不適用 N/A	不適用 N/A		不適用 N/A		
短肢(如侏儒症) Short Stature (eg. Dwarfism)								不適用 N/A
肌肉萎縮症 Muscular Dystrophy		不適用 N/A						
先天性多發性 關節彎曲 Arthrogyposis			不適用 N/A		不適用 N/A	不適用 N/A		
其他(請註明) Others (please specify)								



香港殘疾人奧委會暨傷殘人士體育協會

Hong Kong Paralympic Committee & Sports Association for the Physically Disabled (HKPC&SAPD)

地址：新界沙田美林邨美楓樓B座地下141-148室

Address: Unit 141-148, G/F, Block B, Mei Fung House, Mei Lam Estate, Shatin, N.T.

電話 Tel.: 2602-8232 傳真 Fax: 2603-0106 電郵 Email: [selection@hkparalympic.org](mailto:selection@hkparalympic.org)

網頁 Website: [www.hkparalympic.org](http://www.hkparalympic.org)

## 聲明 Declaration

本人\_\_\_\_\_明白及同意 I, \_\_\_\_\_, hereby understand and agree that:  
(參加者姓名) (Name of Participant)

1. 本人所提供的資料均為真實及正確無誤，且沒有冒用或盜用任何第三者之資料。本人提供的資料如有不實或不正確，其參加資格將被取消；  
All information provided is genuine and correct, without any fraud on submission of personal data, or false submission of personal data of others. I will be disqualified if the information provided is inaccurate, incorrect or omitted;
2. 本人會自行判斷身體狀況是否適合參與是次活動，並明白香港殘疾人奧委會暨傷殘人士體育協會(主辦單位)不就本人的任何身體狀況負責；  
It is my responsibility to determine physical fitness with regard to the participation in this event and the Hong Kong Paralympic Committee & Sports Association for the Physically Disabled (Organizer) will not be held liable for any medical condition of the participant;
3. 本人的個人資料將會送交主辦單位處理，以作招募報名事宜、統計、日後聯絡及活動意見調查之用，亦只限獲主辦單位授權人員方可查閱有關資料作前述目的之用；  
Personal information given will be provided to the Organizer to process the information for purposes relating to enrollment of this event, statistical reviews, future contact purpose and opinion survey. Only those who are authorised by the Organizer will have access to such information for the aforesaid purposes.
4. 本人同意活動當日拍攝之相片及影將用作主辦單位推廣之用；  
Photos and videos taken at this event may be used by the Organizer for related marketing or promotional purpose;
5. 主辦單位將保留限制及拒絕接受報名的權利，以及一切活動中之最終決定權，包括演繹、更改、取消或暫停此活動的內容、條款及細則，而無須另行通知；及  
The Organizer reserves the right to limit and refuse any enrollment, and participants are to abide by the Organizer's decision on all matters relating to this event, which shall be final. This includes the right to interpret and amend the above terms and conditions without prior notice; and
6. 本人對活動中不幸造成的意外、傷亡及財物損失，願意自行承擔全部責任，將不會向主辦單位就上述事項索取賠償、指控及責任上之追討。  
I take full responsibility for any injury, loss or damage to my person and/or property that may arise directly or indirectly from my participation in this event. I will not seek to penalize, prosecute or claim compensation from the Organizer for any injury, loss or damage.

參加者簽署 Signature of Participant: \_\_\_\_\_ 日期 Date: \_\_\_\_\_

緊急聯絡人姓名： \_\_\_\_\_ 聯絡電話： \_\_\_\_\_ 關係： \_\_\_\_\_  
Emergency Contact Person: \_\_\_\_\_ Contact No.: \_\_\_\_\_ Relationship: \_\_\_\_\_

**未滿 18 歲的參加者必須由家長/監護人士填寫下列資料**

**Parent /Guardian is required to complete this part for participant aged below 18**

本人已閱讀上述聲明，並同意參加者 \_\_\_\_\_ (姓名) 參加新秀運動員招募。

I have read the above declaration and agree \_\_\_\_\_ (Name) to participate in Young Athletes Recruitment.

家長/監護人姓名： \_\_\_\_\_ 家長/監護人簽署： \_\_\_\_\_ 關係： \_\_\_\_\_  
Name of Parent/Guardian: \_\_\_\_\_ Signature of Parent/Guardian: \_\_\_\_\_ Relationship: \_\_\_\_\_

請於 2017 年 9 月 25 日或之前將填妥之報名表格以電郵、傳真、郵寄方式或親身交回主辦單位。

Participants should submit the duly completed form by email, fax, post or in person to the Organizer on or before 25 September 2017.