



Hong Kong China Skating Union Members' Application Form
for HKSU Short Track Feeder Team
中國香港滑冰聯盟會員短道速滑梯隊註冊申請表格

| 個人資料 Particulars of Participant | | | |
|--|---------------|--------------------------|--|
| 中文姓名 Chinese Name : | | 英文姓名 English Name : | |
| 會員號碼 Membership Number: | | | |
| 出生日期 (日-月-年) Date of Birth (dd-mm-yyyy) : | | 性別 Gender : | 男 <input type="checkbox"/> 女 <input type="checkbox"/> Male Female |
| 香港身份證號碼: HKID Card No. : | | 國籍 Nationality : | |
| *中文和英文姓名必須全部填寫並與香港身份證或護照的資料相同。 The Chinese and English Names are required to be filled in both and same with them were shown on HKID Card or Passport. | | | |
| 聯絡方法 Contact Detail: | 電話 Tel | | |
| | 電郵 Email | | |
| | 地址 Address | | |
| 教練姓名 Name of Coach : | | | |
| *教練必須為本會註冊教練或國際滑冰聯盟訓練競賽體系內合資格教練。如申請人在海外受訓，請註明教練所屬國際滑冰聯盟會員協會。 Only HKSU Registered Coach or ISU Training System Coach is eligible. If the candidate trains abroad, please indicate the ISU Member Federation of the coach. | | | |
| 確認申請前是否已細閱並了解有關的訓練要求及條款細則 (請在方格內“X”) Please confirm that you have thoroughly read and understood the relevant training requirements and terms and conditions prior to submitting your application. (Please tick as appropriate “X”) | | | |
| <input type="checkbox"/> | 是 YES | <input type="checkbox"/> | 否 NO |

| 成績記錄 Record of Achievements | |
|---|--|
| <p>◇ 申請者需要提供在 2024 年 1 月至 2024 年 12 月*期間參加並達到相關要求之國際/本地舉行的個人最佳成績，包括但不限於香港錦標賽、香港盃、本地測試賽、亞洲公開賽、SEA Open Trophy、全國賽事、其他 ISU 認可賽事等。</p> <p>Provide information on your personal best time that <u>meet the requirement</u> achieved in international/local competitions in the period between January 2024 to December 2024, including but not limited to Hong Kong Championships, Hong Kong Cup, Trial, Asian Open Trophy, SEA Open, Trophy, Chinese Nationals or other ISU Sanctioned Events.</p> | |

| | | | |
|-----------------|------|---------------------------------------|--|
| 日期: Date: | | 比賽/ 地點 Name of Competition/ Venue: | |
| 賽事項目: Event: | 500m | 時間/名次: Results / Position: | |

請將本表格 電郵至 / Please email: stss@hksu.org

香港銅鑼灣大球場徑 1 號, 奧運大樓 1023 室 / Room 1023, Olympic House, 1 Stadium Path, Causeway Bay, Hong Kong

電郵/ Email: enquiry@hksu.org 傳真/ Fax : 2504 8191 電話 / Tel : 2577 8010

www.hksu.org



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Declaration 聲明

本人願意遵守中國香港滑冰聯盟會章和會員管理條例、相關遴選準則，以及相關訓練要求及條款細則。本人謹此證明身體狀況適宜參加上述之活動。如本人因參加是項活動而引致任何損失或受傷，主辦機構無需負責。

I, undersigned, fully understand and accept the HKSU Articles of Association and Members Management Regulations, selection guidelines as well as related training requirements and terms and conditions. I certify that I am physically fit and fully understand that I am joining this event at my own risk and shall be liable for any loss of property or injury to my person. Hong Kong China Skating Union Limited is hereby indemnified of all risk to my physically well-being and related property.

申請人簽署

Applicant signature :

日期 Date:

申請人父母或法定監護人簽署

Applicant's parent or lawful
guardian signature :

日期 Date:

(十八歲以下申請人須與父母或法定監護人共同簽署 Applicant signature and applicant's parent or Lawful guardian signature are required both for the applicant under the age of 18.)