

2024/25 MEMBERSHIP APPLICATION / RENEWAL FORM

(Membership valid from 1 September 2024 to 31 August 2025)

2024/25 會員入會 / 續會申請表格

(會籍有效期為 2024 年 9 月 1 日至 2025 年 8 月 31 日)

Notes 注意事項：

- i) This form is required to be fully completed. Application form with missing or inadequate may be rejected.
申請表格內的資料必需全部填妥，否則本會未必受理有關申請。
- ii) The personal information provided by you will only be used for enrolment of activities organized by Squash Association of Hong Kong, China, future contact and opinion survey. Apart from the staff duly authorized by the Association, no one will be given access to the information. For correction or access to personal data collected by means of this form, please contact Squash Association of Hong Kong, China.
你提供的個人資料，只作中國香港壁球總會舉辦的各項活動報名事宜、統計、日後聯絡及活動意見調查之用，除本會授權職員外，將不會提供予其他人士。遞交申請表後，如欲更正或查詢個人資料，請與本會辦事處聯絡。

TYPES OF MEMBERSHIP 會員類別 (Please '✓' the appropriate. 請於適當的空格填上'✓')

	ORDINARY MEMBER 成人會員	JUNIOR MEMBER 青少年會員 (For applicants aged below 19 before 1 September 2024 申請者於 2024 年 9 月 1 日前為十九歲以下)
New Application / **Re-Join Member 新入會 / **重新入會	<input type="checkbox"/> 港幣 HK \$425 HK \$100 Entrance Fee 入會費 + HK \$325 Annual Subscription 年費	<input type="checkbox"/> 港幣 HK \$35 Membership No. (if applicable) 會員號碼 (如適用) _____
Renewal 續會	<input type="checkbox"/> 港幣 HK \$325 Membership No. 會員號碼 _____	
Summer League Provisional Membership 夏季聯賽臨時會員	<input type="checkbox"/> 港幣 HK \$175	

**Rejoin Members refer to players who do not hold a valid ordinary membership for the season of 2023/24.
重新加入會員為未持有有效 2023/24 會籍的球員。

PERSONAL DATA 個人資料

Full Name in English

(As shown on HKID / Birth Certificate / Passport)

英文姓名 (與香港身份證/ 出生證明書/ 護照相同)

_____ Last Name 姓

_____ First Name 名

Name in Chinese (If applicable)

中文姓名 (如適用)

Gender M 男

性別 F 女

Date of Birth

出生日期

____/____/____ YYYYY 年 MM 月 DD 日

HKID / Birth Certificate / Passport No.

香港身份證/ 出生證明書/ 護照號碼

First 5 alphabet(s)
and digits
首 5 個字母及數字
e.g. A1234

Preferred Language

常用語言

Chi 中

Eng 英

Email

電郵地址

Contact No.

聯絡電話

(1) _____

(2) _____

Emergency Contact

緊急聯絡人

Emergency No.

緊急聯絡電話

PAYMENT METHOD 付款方法

Cheque (Payable to "Squash Association of Hong Kong, China")

支票 (支票抬頭為 "中國香港壁球總會" 或 "Squash Association of Hong Kong, China")

Bank

付款銀行 _____

Cheque No.

支票號碼 _____

Cash (Please submit in person, address: G/F, Hong Kong Squash Centre, 23 Cotton Tree Drive, Central)

現金 (請親臨本會辦事處辦理, 地址: 香港紅棉路 23 號香港壁球中心地下)

DECLARATION / PARENTAL CONSENT (For applicants aged below 18, this part must be completed by his/ her parent or guardian)

聲明 / 家長同意書 (未滿十八歲的申請者須由家長/ 監護人填寫)

I declare that ** I am / _____ (applicant's name) is healthy, physically fit, and suitable

to participate in the Squash League and/or other tournaments/ activities. Squash Association of Hong Kong, China shall not be liable for any injury or death or loss the participant may suffer or incur arising from his/her participation in the Squash League and/or other tournaments/ activities. All information given above is true, correct and complete. ** I / The applicant hereby agree to comply with the Terms, Rules and Regulations, and By-laws of the Association, which may refuse to accept this application without giving any reason therefore.

在此聲明 **本人 / _____ (申請者姓名) 身體健康及體能良好, 適宜參加壁球聯賽及 / 或其他比賽 / 活動。如因參加壁球聯賽及 / 或其他比賽 / 活動而引致傷亡或其他損失, 中國香港壁球總會無須負責。以上各項資料均屬真實、正確及完整。 **本人 / 申請者同意遵守中國香港壁球總會之會章、會規及守則, 中國香港壁球總會有權拒絕本申請而無須給予任何原因。

Applicant's Signature

申請者簽署 _____

Date

日期 _____

To be completed by parent / guardian 由家長/ 監護人填寫

Parent/ Guardian's Name

家長/ 監護人姓名 _____

Parent/ Guardian's Signature

家長/ 監護人簽署 _____

Contact No.

聯絡電話 _____

Date

日期 _____

**Please delete as applicable 請刪去不適用者。

Agree 同意

to receive messages and promotional materials from Squash Association of Hong Kong, China.

Disagree 不同意

接收中國香港壁球總會的訊息及宣傳資料。

For Official Use 辦事處專用

Membership No. _____

Receipt No. _____

Date Received _____