Organized by: Subvented by:





HONG KONG SQUASH CHAMPIONSHIPS 2022 (Men's & Women's Championships) <u>Entry Form</u>

Name:#					Gender:#	Male / Female
Date of Birth:#	(Day)	(Mon	ith) (Year)	ı	HKID Card / Passport No. (First 4 digits):#	
Contact No.:	(Mobile No.)#		(Other)		021/22 HKS Membership No (if applicable):	
Email Address:#						
Emergency Contac	t Person:#			Em	nergency Contact No.:#	
The Recent participation in League(if applicable):		(Season) (Div)		(Tear	n)	(Divisional Ranking)
Tee Size# (please'	✓ ' the app	oropriate) ** No	change of size once dist	tributed.		
☐ XXS (Length 54cm, Half Chest 40cm)			☐ XS (Length 64cm	ı, Half Chest 44cm)	alf Chest 44cm) S (Length 67cm, Half Chest 47cm)	
☐ M (Length 70cm, Half Chest 50cm)			L (Length 73cm,	Half Chest 53cm)	☐ XL (Length 75cm	, Half Chest 56cm)
☐ XXL (Length 77	cm, Half C	hest 59cm)				
<u>Group</u> [#] (please' ✓	' the appro	priate)				
☐ Men's Championship			☐ Women's Championship			
Crossed cheque:	e: (Cheque No.)#		(Bank)		Amount:	
Declaration # (All a	pplicants r	nust sign this de	eclaration)			
I declare that I am I	nealthy, ph	ysically fit, and	suitable to participate in	the above activity. H	ong Kong Squash shal	l not be liable for any injury
or death which I ma	ay suffer in	this activity, if the	he cause of injury or dea	ath is due to my own	negligence or inadequ	acy in health and fitness.
Participant's Signature:			Date:			
Parental Consent	[‡] (Applicab	le to applicants	aged below 18 only. Thi	s consent must be c	ompleted by his/her pa	rent or guardian.)
I declare that		(арр	licant's name) is healthy	y, physically fit, and	suitable to participate i	n the above activity. Hong
Kong Squash shall	not be liab	le for any injury	or death which the partic	cipant may suffer in t	his activity, if the cause	of injury or death is due to
his/her negligence	or inadequ	acy in health ar	nd fitness.			
Parent/ Guardian's Name:			Parent/ Guardi Signature:	ian's 		Date:

Deadline: 30 June 2022 (Thursday)

Return the completed form together with a <u>crossed cheque</u> (payable to "Hong Kong Squash") for payment on or before the deadline to Hong Kong Squash Office (Address: G/F, Hong Kong Squash Centre, 23 Cotton Tree Drive, HK).

The information provided by you will only be used for enrolment of this tournament and future contact. For correction or access to personal data collected by means of this form, please contact Hong Kong Squash at 2869 1592 / 2810 4086.

(# Mandatory Field)