

12 May 2004  
By Post

To: All Primary Schools / Secondary Schools & Affiliated Clubs

**Promotion Package of Synchronized Swimming**

We are pleased to inform you that our Synchronized Committee of the Hong Kong Amateur Swimming Association is going to launch a set of promotion package for students who are interested in learning synchronized swimming during their leisure.

There are various packages that consist of Elementary to Intermediate Synchronized Swimming Course, Five Stars Programme as well as Youth Synchronized Swimming Promotion Scheme. For further details, please refer to the enclosed Promotion Package leaflet.

Besides, we are going to organize a **Synchronized Swimming Fun Day** on **05 June 2004 (Sat)** from **1500 to 1800** at **Kowloon Park Swimming Pool**, all interested parties at the age of 6 or above and know how to swim are welcomed to join and have a trial on the sport. For those interested, please kindly return the Reply Slip to ASA office either by fax or by mail on or before 28 May 2004 (Friday) before 1700.

Thank you for your attention. We are looking forward to seeing you in the Fun Day and joining our programme in the future.

Should there be any inquiry, please contact Ms. Jennie Leung at 2572 8594.

Best regards,

Ka Yi CHUI  
Chairman  
Synchronized Swimming Committee, HKASA

c.c. Hon. Secretary/ Hon. Treasurer  
Hon. Secretary, Syn. Sw. Comm.

**To: Hong Kong Amateur Swimming Association**  
(Room 1003, Queen Elizabeth Stadium, 18 Oi Kwan Road, Wanchai, HK)  
**Fax: 2591 0792**

**Synchronized Swimming Fun Day --- 05 June 2004 (1500-1800)**

**Master Entry Form for School / Clubs 學校 / 屬會報名總表**

Name of School / Club 學校/屬會名稱: \_\_\_\_\_

School / Club Address 學校/屬會地址: \_\_\_\_\_

Contact Person 聯絡人: \_\_\_\_\_ ( \_\_\_\_\_ )

Contact Tel. No. 聯絡電話號碼: \_\_\_\_\_ Fax 傳真: \_\_\_\_\_

**Mater Entry Table 報名資料表:**

No.	Name in English	中文姓名	Age 年齡	Contact Tel. No. 聯絡電話號碼
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				

\* Photo copy when necessary (有需要可自行影印)\*

**To: Hong Kong Amateur Swimming Association**  
(Room 1003, Queen Elizabeth Stadium, 18 Oi Kwan Road, Wanchai, HK)  
**Fax: 2591 0792**

## Synchronized Swimming Fun Day --- 05 June 2004 (1500-1800)

### Participant's Personal Particulars 參加者個人資料

Name in block letters (surname first): \_\_\_\_\_ 中文姓名：\_\_\_\_\_

Date of Birth 出生日期: \_\_\_\_\_ Age 年齡: \_\_\_\_\_ Sex 性別: \_\_\_\_\_

Contact Tel. No. 聯絡電話號碼: \_\_\_\_\_

Address 地址 : \_\_\_\_\_

#### In case of emergency, please contact 如有任何緊急事情，請代通知：

Name in English (in Full): \_\_\_\_\_ 中文姓名：\_\_\_\_\_

Contact Tel. No. 聯絡電話號碼: \_\_\_\_\_ Relationship 關係: \_\_\_\_\_

Remark: The information provided by you will only be used for the enrolment and promotion of recreation and sports activities organized by our Association and co-organizing parties. For correction of or access to personal data after submission of this form, please contact our staff.

備註：所提供的資料只供本會作紀錄及比賽呈報之用。如欲更改或查詢申報的個人資料，可與本會職員聯絡。

#### Declaration 責任聲明

I, \_\_\_\_\_ ( Applicant's name ), am physically fit without any physical defect, and suitable to participate in the above activity. Organizer shall not be liable for any injury that may suffer in this activity.

本人(申請人姓名) \_\_\_\_\_ 的健康及體能良好並適宜參與上述訓練課程。若因健康及體能欠佳而引致受傷，主辦機構則無需負任何責任。

Applicant's Signature (Signed by Parent if Age under 18)

申請者簽署(18歲以下人仕由父母簽署)

Name (Signature Person) in Block Letter

簽署人姓名(請用正楷填寫)

Date

日期

\* Photo copy when necessary (有需要可自行影印)\*