



# HKASA REGIONAL SWIMMING TRAINING SQUAD

## 香港業餘游泳總會地區青年游泳訓練組

Squad Member Application & Nomination Form 地區訓練運動員申請及提名表格

New Application 新申請  Renewal / 續期 Registration No. 註冊編號: \_\_\_\_\_

### Personal Information 個人資料

Name in block letters (surname first) 英文姓名：請以正楷填寫 (先寫姓氏)

Name in Chinese 中文姓名： Sex 性別： Age 年齡：

Date of birth 出生日期： HKID Card / Passport no. 香港身份證 / 護照號碼：  
D 日 M 月 Y 年

Contact Tel no. 聯絡電話號碼： Club 屬會：

Selection of Region 地區選擇 \*(Please circle which is appropriate 請圈上所選擇項目)

\*Hong Kong Island 香港 / Kowloon 九龍 / New Territories 新界

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

Name in English： 中文姓名：

Tel no. 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 full name), am physically fit without any physical defect, and suitable to participate in the above activity / training. Organizer and Co-organizer shall not be liable for my injury that may suffer from this activity / training. I have completely understood and agreed to abide by rules & regulations of Regional Squad Athlete Menu, HKASA and FINA.

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，主辦及協辦機構則無需負任何責任。本人清楚明白並願意遵守有關上述活動/訓練課程之運動員守則、泳總及國際泳聯規則。

Applicant's Signature (Signed by Parent if Age under 18) Name (Signature Person) in Block Letter Date  
申請者簽署 (18歲以下人士由父母簽署) 簽署人姓名 (請用正楷填寫) 日期

\* ASA Club's Authorized Signature & Club Chop:

\* 屬會授權人簽署並蓋章: \_\_\_\_\_

Name 姓名: \_\_\_\_\_

\*Only previously provided "Authorized Signature"(s) & "Club Chop" will be accepted.

\*本會祇接受已提交之屬會資料表中的簽名樣本及會印式？。

**HKASA REGIONAL SWIMMING TRAINING SQUAD**  
**Nominee's Past Record Sheet**

**NAME:** \_\_\_\_\_ **SEX:** \_\_\_\_\_

**NOMINATING CLUB:** \_\_\_\_\_

\*Only results of LONG COURSE events and ASA's sanctioned events will be accepted

\*\*All results should be submitted with supporting document

<b>EVENT</b>	<b>TIME</b>	<b>NAME OF MEET</b>	<b>DATE OF MEET</b>	<b>REMARKS</b>
	: :			
	: :			
	: :			
	: :			
	: :			

\_\_\_\_\_  
**Authorized Signature with Club Chop**

\_\_\_\_\_  
**Date**

**PLEASE RETURN TO HKASA TOGATHER WITH APPLICATION & NOMINATION FORM**