



香港劍道協會有限公司 Hong Kong Kendo Association Limited

香港銅鑼灣掃桿埔大球場徑一號·奧運大樓 1029室

Room 1029, Olympic House, No. 1 Stadium Path So Kon Po, Causeway Bay, Hong Kong

電話 Tel: 852-25048145 傳真 Fax: 852-28908052 電郵 Email: hkka@hkolympic.org

個人相片
PHOTO

會員申請表 Application Form for Membership

個人資料 General Information

英文姓名 English Name		中文姓名 Chinese Name		香港身份證/護照編號 I.D. Card/Passport No.	
出生日期 Date of Birth (dd/mm/yy)		年齡 Age	性別 Gender	國籍 Nationality	
電話 Tel	傳真 Fax	手提電話 Mobile/Pager		電郵 E-mail address	
職業 Occupation		就業機構名稱及地址 Company Name & Address			
住址 Home Address			自何時居港 Residence in Hong Kong since? ()年 years ()月 months		

過往之劍道經驗, 如有 Previous Kendo experiences, if any

現時段位/級(劍道/居合道, 請列明) Present Dan/Kyu (Kendo/laido, please specify)	Place and Country in which the present Dan/Kyu was awarded 持有段位/級證書之簽發國家
曾加入之道場名稱 Name of previous Dojo of which you were a member	現時是否還是該道場會員? Are you still a member of the said Dojo?

聲明: 本人/吾等欲申請成為香港劍道協會會員, 並同意承擔及遵守由香港劍道協會所規定的章則及規例。本人在此明確聲明, 所提供之個人資料是正確的。在香港劍道協會接受本人的人會申請之前, 本人謹代表本表格上所列之所有人等, 同意作出以下有關個人責任之聲明。
本人/吾等假若在香港劍道協會舉辦或安排之任何活動中不幸導致個人或他人身體損傷或死亡、或任何財物損失, 或任何器材損毀、損壞、損失, 一概不會向香港劍道協會, 或與香港劍道協會合辦之機構及有關合辦機構之執行委員、工作人員、職員及會員等作出任何形式之追究行動。本人亦承諾會定期檢查和保養裝備, 以防止傷害自己和其他人, 謹此聲明。

Declaration: I, the undersigned, wish to enroll with HKKA as an Individual Member and agree to undertake to be abided by all the terms and conditions, rules and regulations set forth by HKKA. I hereby expressly declare that, to the best of my knowledge, the information contained in this application is correct.
As a condition of membership of the Hong Kong Kendo Association's (HKKA), in accordance with the details attached, I, for myself, my heirs, administrators and/or for the minor on whose behalf I am signing, hereby: waive all claims, expenses, rights, demands and actions of any nature for any personal injury or death to myself/ourselves or to a third party by myself/ourselves, any loss of personal belongings during Kendo practice or for any loss or damage sustained to my/our equipment or possessions arising from or in connection with my/our participation in Kendo activities organised and/or arranged by the HKKA, their officials, servants and agents, or other Association members. Besides, as kendo is a contact sport, I undertake to regularly check and maintain my equipment so as to prevent injury to myself and others.

本人謹此聲明本人身體狀況良好, 並明白及自願參加劍道訓練班, 並願意承擔財物損失和傷亡之責任, 有關合辦機構及人仕均無需負上任何責任。

I certify that I am physically fit and fully understand that I am joining this program at my own risk and shall be liable for any loss of property or injury to my person. The relevant presenting organization(s) is/are hereby indemnified of all risk to my physical well-being and related property.

申請人簽署 Signature of Applicant _____ 日期 Date _____

學員未滿18歲需由家長或監護人簽名認可 For applicants under the age of 18 shall require the guardian's consent

家長/監護人姓名 Name of Legal Guardian	與申請者關係 Relationship with the applicant	香港身份證/護照編號 I.D. Card / Passport No.
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家長/監護人簽名 Signature of Guardian _____ 日期 Date _____

Official Use Only

The Executive Committee accepts / rejects the applicant's application for Ordinary/Associate membership		Membership No.
Amount of Fees received	Paid by:	Received and Confirmed by:
* Entrance Fee: HK\$	Bank in /Cheque	
* Annual Fee: HK\$		
* Monthly Fees: HK\$		

Authorized Signature _____ Date _____

個人資料(私隱)條例 Personal Data (privacy) Ordinance

- 1) 此申請表內的資料將受個人資料(私隱)條例保護, 列為機密
The information in this form will be protected by the Personal Data (privacy) Ordinance and classified as Confidential;
- 2) 申請者所提供的資料只用於活動報名事宜及活動宣傳之用。在遞交申請表後, 如欲更改或查詢所申請的個人資料, 可與本會聯絡。
The information provided by you will only be used for the enrollment and promotion of recreation and sports activities organized by our Association and co-organizing parties. For amendment of or access to personal data after submission of this form, please contact the staff of our Association.
- 3) 有關資料可能提供予中間人與其業務運作有關的第三者服務供應商或其他對香港劍道協會有保密責任的人士。
It may provide such information to its agent or third party service provider in connection with the operation of its business or any other person under a duty of confidential to the HKAAA.