



第十五屆香港公開劍道新秀賽  
第十二屆香港公開劍道青少年賽

15<sup>th</sup> Hong Kong Open Novice Kendo Championships  
12<sup>th</sup> Hong Kong Open Junior Kendo Championships

香港劍道協會免責條款

Disclaimer of Hong Kong Kendo Association

參加者資料

Particulars of Participant

英文姓名 Name(English)	中文姓名 Name (Chinese)	身份證 / 護照編號 I.D. Card/Passport No.  xxx( )
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**Disclaimer :**

I request that the application of the captioned championships be accepted and agree to be abided by all rules and regulations of the Hong Kong Kendo Association (HKKA) and the captioned championships and otherwise undertake to behave in such a manner as to contribute to the safety and well being of myself and others. I understand that the HKKA assumes no responsibility for injuries or death or illnesses which I may sustain as a result of my physical condition or from my participation in any of its competition or practice, use of its venues, equipments and facilities, and expressly acknowledge on behalf of myself and my heirs that I assume the risk for any and all injuries or death or illnesses which may result from my participation in any of its competition or practice, use of its venues, equipments and facilities. I hereby release and discharge the HKKA, its members and the volunteers from any and all claims for injury, death, illness, loss or damage which I may suffer as a result of participation in any of its competition or practice, use of its venues, equipments and facilities. I understand that the HKKA is not responsible for personal property lost or stolen while in any other premises or location of its competitions.

**\*Note** The information provided by you will only be used for enrollment of sports activities organized by the Hong Kong Kendo Association, statistical reviews, future contact purpose and opinion survey. Only those who are authorized by this Association will have access to such information for the aforesaid purposes. For correction of or access to personal data collected by means of this form, please contact staff of the Association.

參加者簽署

日期：

Signature of Participant \_\_\_\_\_

Date: \_\_\_\_\_