



香港東區欖球會

Hong Kong East Rugby Football Club



通訊地址：香港筲箕灣郵局郵政信箱44127號 P. O. Box 44127, Shau Kei Wan Post Office, Hong Kong.
 網址：www.hkerugbyfootballclub.org 電郵：rugbyhke@yahoo.com.hk 電話：(852)82000954

會籍申請表 Membership Application Form

收費類別 Charge Type	入會費 Admission Fee 一次性收費 One-off Payment 已包括 Include:	年費 Annual Fee
申請類別 Type of Application	<ul style="list-style-type: none"> 比賽球衣一件 A Training Tee 練習球衣一件 A Jersey 球褲一條 A Pant 長襪一對 A Pair of Socks 牙膠一個 A Mouth Guard 	<ul style="list-style-type: none"> 會籍有效期為由 1 月(或繳付年費當日起計)至同年 12 月 Membership is valid through January (or from the date of payment of the Annual Fee) to December of the same year. 現會員須於會籍有效期內(即 12 月 31 日或之前)繳付收費以延續會籍 Current members should pay annual fee to renew membership during the validity period of their membership (ie. on or before December 31).
<input type="checkbox"/> 新會籍 New Membership	\$400 (港幣 HKD)	\$700 (港幣 HKD)
<input type="checkbox"/> 延續會籍 Renew Membership		\$700 (港幣 HKD)

球員會員資料 PLAYER MEMBER INFORMATION					
姓名 Name	中文 Chinese				
	英文 English				
出生日期 Date of Birth			性別 Gender		
香港身份證/出生證明書號碼(首 5 個字元) Hong Kong ID Card / Birth Certificate No. (First 5 Character)			溝通語言 Spoken Language		
身體概況 Physical Profile	身高(厘米) Height (cm)		體重(公斤) Weight (kg)		
	長期病 Chronic Illnesses		<input type="checkbox"/> 葡萄糖六磷酸去氫酵素缺乏症 G6PD Deficiency <input type="checkbox"/> 哮喘 Bronchial Asthma <input type="checkbox"/> 腦癇病 Epilepsy <input type="checkbox"/> 高熱引致抽搐 Fits due to Fever <input type="checkbox"/> 腎病 Kidney Disease <input type="checkbox"/> 心臟病 Heart Disease <input type="checkbox"/> 糖尿病 Diabetes Mellitus <input type="checkbox"/> 其他 Others:		
就讀學校名稱 Attending School Name		<input type="checkbox"/> 精神問題 Mental Problems <input type="checkbox"/> 肺結核 Tuberculosis <input type="checkbox"/> 食物敏感 Allergy to Food <input type="checkbox"/> 藥物敏感 Allergy to Drugs <input type="checkbox"/> 貧血 Anaemia <input type="checkbox"/> 血友病 Haemophilia <input type="checkbox"/> 聽覺不健全 Hearing Defect			
聯絡電話 Phone No.	日間 Day Time		<input type="checkbox"/> 支援 WHATSAPP 即時通訊應用程式 Support WHATSAPP instant messaging application		
	晚間 Night Time		<input type="checkbox"/> 支援 WHATSAPP 即時通訊應用程式 Support WHATSAPP instant messaging application		
電郵地址 E-Mail Address					

基本會員(家長/法定監護人)資料 BASIC MEMBER (PARENT / GUARDIAN) INFORMATION					
中文姓名 Chinese Name					
英文姓名 English Name					
香港身份證/出生證明書號碼(首 5 個字元) Hong Kong ID Card / Birth Certificate No. (First 5 Character)			職業 Occupation		
與球員會員的關係 Relationship with Player Member					
聯絡電話 Phone No.	日間電話 Day Time Phone No.		<input type="checkbox"/> 支援 WHATSAPP 即時通訊應用程式 Support WHATSAPP instant messaging application		
	晚間電話 Night Time Phone No.		<input type="checkbox"/> 支援 WHATSAPP 即時通訊應用程式 Support WHATSAPP instant messaging application		
電郵地址 E-Mail Address					
住宅地址 Residential Address					

緊急聯絡人資料 EMERGENCY CONTACT PERSON INFORMATION			
中文姓名 Chinese Name			
英文姓名 English Name			
與球員會員的關係 Relationship with Player Member			
聯絡電話 Phone No.	日間電話 Day Time Phone No.	<input type="checkbox"/> 支援 WHATSAPP 即時通訊應用程式 Support WHATSAPP instant messaging application	
	晚間電話 Night Time Phone No.	<input type="checkbox"/> 支援 WHATSAPP 即時通訊應用程式 Support WHATSAPP instant messaging application	

基本會員（家長 / 法定監護人）聲明 BASIC MEMBER (PARENT / GUARDIAN) Declaration	
<p>• 本人願意讓我的子女參加香港東區欖球會舉辦或參與的訓練、比賽或活動。本人明白香港東區欖球會及其有關人士沒有責任保護或看管本人或本人的子女或任何的財物。如本人或本人的子女在訓練、比賽或活動期間發生意外或損傷，香港東區欖球會及其有關人士也無需負責。</p> <p>I would like my child(ren) to join Hong Kong East Rugby Football Club for training sessions and matches against other clubs and other activities. I understand that Hong Kong East Rugby Football Club, its servants, agents, coaches or employees do not have any liability for the loss of property, for accidents or injuries to me or my child(ren), however caused, during the course of training or matches at this or any other venue.</p> <p>• 本人明白若本人的子女曾經或已知患有長期病患，本人有責任陪同本人子女一起參與由香港東區欖球會或有關單位所舉辦之訓練、比賽及其他活動。I understand that if my child(ren) has been or is known to have a chronic illness, I have the responsibility for accompanying my child(ren) to participate in training, competitions and other activities organized by the Hong Kong East Rugby Football Club or the relevant units.</p> <p>• 本人同意香港東區欖球會有權以印刷、電子或錄像等形式發佈本人或本人子女（不公開姓名的情況下）之圖像。本人將不追討香港東區欖球會關於版權持有及使用素材以用於任何出版之賠償。I give Hong Kong East Rugby Football Club, permission to publish in print, electronic or video format the likeness or image of me or my child(ren) (without his or her name). I release all claims against Hong Kong East Rugby Football Club with respect to copyright ownership and publication including any claim for compensation for use of the materials.</p>	
<input type="checkbox"/> 本人同意 I agree that 個人資料可用於香港東區欖球會或其他有關組織作推廣欖球活動或與其有關的用途。 Hong Kong East Rugby Football Club or concerned parties can use my personal information for the purpose of promoting rugby activities.	簽署 Signature: _____ 姓名 Name: _____ 日期 Date: _____

請把已填妥的會籍申請表連同以下項目一併遞交 Please submit the following items with the completed Membership Application Form

申請類別 Type of Application	新會籍 New Membership	延續會籍 Renew Membership
遞交項目 Submission Items	<ul style="list-style-type: none"> 球員會員近照 1 張 A Recent Photo of the Player Member 球員會員身份證副本 / 出生證明書副本 Copy of Player Member Hong Kong ID Card / Birth Certificate 與入會費及年費金額相符的劃線支票^{^1}A Crossed Cheque^{^1} which amount Equal to the Sum of Admission Fee and Annual Fee 	<ul style="list-style-type: none"> 球員會員近照 1 張 A Recent Photo of the Player Member 與年費金額相符的劃線支票^{^1} / 銀行存款收據^{^2}A Crossed Cheque^{^1} / Bank-in Slip^{^2} which Amount Equal to the Annual Fee
遞交方法 Submission Method	親身遞交 Submit In Person	親身遞交 / 郵寄遞交 ^{^4} Submit In Person ^{^3} / Submit By Mail ^{^3}

^{^1} 抬頭請寫「香港東區欖球會」及於背面寫上球員會員姓名及基本會員姓名 Payable To "Hong Kong East Rugby Football Club" and write the name of Player Member and Basic Member

^{^2} 直接存入香港東區欖球會於香港上海滙豐銀行開納的戶口「404-110991-001」 Direct deposit into the account of the Hong Kong Eastern Rugby Club in HSBC "404-110991-001"

^{^3} 香港筲箕灣郵局郵政信箱 44127 號 P.O.Box No. 44127, Shau Kei Wan Post Office, Hong Kong

裝備簽收 EQUIPMENT SIGNED RECEIPT			
裝備 Equipment	數量 Qty	收取日期 Received Date	基本會員簽署 Signature of Basic Member
球衣 Jersey	一件 1 pc.		
球褲 Pant	一條 1 pc.		
長襪 Socks	一對 1 pair		
牙膠 Mouth Guard	一個 1 pc.		

球會幹事會專用 OFFICIAL USE ONLY			
事務	日期	經手人	項目
交表相關			<input type="checkbox"/> 親身遞交 <input type="checkbox"/> 郵寄遞交
會籍相關			申請結果: <input type="checkbox"/> 接納會籍有效期由 _____ 至 _____ <input type="checkbox"/> 不接納 ~ 備註 編配組別: <input type="checkbox"/> U6 <input type="checkbox"/> U7 <input type="checkbox"/> U8 <input type="checkbox"/> U9 <input type="checkbox"/> U10 <input type="checkbox"/> U11 <input type="checkbox"/> U12
繳款相關			合共金額: 港幣 _____ 收據編號 _____ 繳付方式: <input type="checkbox"/> 現金 <input type="checkbox"/> 支票 ~ 支票號碼 _____ <input type="checkbox"/> 存款 ~ 銀行存款收據號碼 _____