



Organized by
The Gymnastics Association of Hong Kong, China



Subvented by
Leisure and Culture Services Department

Aerobic Gymnastics talent team selection 2015

Directives

Aim :	<p>Select potential gymnasts and provide systemic long-term training.</p> <p>In order to improve and develop their skills level and represent Hong Kong to participate in international competition</p>	
Target :	<p>6 to 25 years old.</p> <p>Enthusiasm in Aerobic Gymnastics and face strict training; and Hong Kong permanent resident</p>	
Date :	10th May 2015 (Sunday)	
Time :	5:00 p.m. to 8:00 p.m.	
Venue :	<p>Pei Ho Street Sports Centre – Dance Room</p> <p>(5/F, Pei Ho Street Municipal Services Building, 333 Ki Lung Street, Sham Shui Po, Kowloon)</p>	
Content :	<p>Music sense and performance :</p>	<p>Performance a routine with music. Time: 2 mins ;</p>
	<p>Abilities :</p>	<p>Items included : STRADDLE SPLIT, FRONTAL SPLIT, PUSH UP, TUCK JUMP, STRADDLE SUPPORT, VERTICAL SPLIT, TURN AND AIR TURN</p>
	<p>Body Composition :</p>	<p>body composition test.</p>
Notice :	<ol style="list-style-type: none"> 1. Participants must arrive on 4:45 p.m. or before. Wear proper gymnastic suit / sportswear and sport shoes. 2. Participants should bring along with the following items and report to GAHK staffs : <ul style="list-style-type: none"> ➤ Identification : (i.e. HKID card/ Student handbook/ Student card) ; ➤ Certificate issued by GAHK (if necessary). 3. No on-site application is accepted. 	
Application :	<p>Fill the application form and post it together with copy of certificate, self-addressed envelope and the cheque (Heading: The Gymnastics Association of Hong Kong, China) to “Room 1002, Olympic House, 1 Stadium Path, Causeway Bay, HK”.</p>	
Fee :	HKD\$60.00 (Included \$40 application fee and \$20 insurance fee)	
Deadline :	7 th May 2015 (Thursday) (According to post chop)	
Result release :	<ol style="list-style-type: none"> 1. Result will release within 1 months in GAHK website (www.gahk.org.hk) 2. All decision is made by Aerobic Gymnastics technical committee. No appeal will be accepted. 	

Remarks :	<ol style="list-style-type: none"> 1. GAHK have the right to check the identification. Participants will be disqualified if there is any misreport. 2. All fee will not be refunded 3. There is potential risk in gymnastics. GAHK suggest all participants to purchase their personal insurance
Enquires :	2504 8233 (GAHK)

Talent team training schedule (June 2015 – December 2015) (Two Days Training Per Week)		
Venue	Po On Road Sports Centre – Dance Room (2/F, Po On Road Municipal Services Building , Po On Road 325 – 329, Sham Shui Po, Kowloon)	Pei Ho Street Sports Centre –Dance Room (5/F, Pei Ho Street Municipal Services Building,333 Ki Lung Street, Sham Shui Po, Kowloon)
Time	Every Tuesday , 6:00 p.m. – 8:00 p.m.	Every Sunday , 5:00 p.m. – 8:00 p.m.
Fee	Around HKD\$ 1,500 – \$1,800 (Two months per phase. The actual amount according to training hours)	

**Training schedule may be change if necessary



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Application Form

Name : (CHI) _____ (ENG) _____

DOB : _____ (dd/mm/yy) HKID No. : _____

Address : _____

Email : _____ Phone : _____

School : _____ Class : _____

Reason and targets of joining the Aerobic Gymnastics Talent team :

Participation in other GAHK talent team : Yes 、 No

(If yes , Which kind of gymnastics _____)

Declaration

(The parents / guardians of applicants aged below 18 must sign this form)

I certify that I am entering this competition at my risk and responsibility. I agreed to abide by the regulations, policies and anti-doping policy of The Gymnastics Association of Hong Kong, China. I for myself, my executors and administrators, do hereby waive and release, any and all rights, claims and causes of action I have or May have against The Gymnastics Association of Hong Kong, China and all sponsors, promoters, supporters and all other contributors from any and all liability arising from illness, injury death, loss and economic consequences I May suffer as a result of my entry in this event from any cause whatsoever, including negligence. I certify that I am physically fit and sufficiently trained to compete for the completion of this event. I grant permission and assign all rights, title and interest to the organizer to utilize my appearance, name voice biodata and likeness in connection with the race in any and all media throughout the world in perpetually and agree to waive any rights of inspection or approval associated.

I have read and understood the declaration and Physical Activity Readiness (Appendix I).

Date: _____ Name of Guidance: _____

Signature of Applicant: _____ Signature of Guidance: _____

* The information will only be used for this event.

**The Gymnastics Association
of Hong Kong, China**

中國香港體操總會

Room 1002, Olympic House, 1 Stadium Path,
So Kon Po, Causeway Bay, Hong Kong
香港銅鑼灣掃桿埔大球場徑一號奧運大樓1002室
Tel: (852) 2504 8233 Fax: (852) 2882 8590
Web-site : www.gahk.org.hk
E-mail: mail@gahk.org.hk



Affiliated to:

The Sports Federation &
Olympic Committee Hong Kong, China

Federation Internationale de Gymnastique

Asian Gymnastic Union

Pacific Alliance of National Gymnastic Federations

(Limited by Guarantee)

Appendix I

Physical Activity Readiness

1. I certify that:
 - My doctor has never said that I have a heart condition and that I should only do physical activity recommended by a doctor.
 - I have never felt pain in my chest when I do physical activity.
 - In the past Month, I did not have had chest pain when I was not doing physical activity.
 - I have never lost my balance because of dizziness or I have never lost consciousness.
 - I do not have a bone or joint problem (for example, back, knee or hip) that could be made worse by a change in my physical activity.
 - My doctor is not currently prescribing drugs (for example, water pills) for my blood pressure or heart condition.
 - I do not know of any other reasons why I should not do physical activity.
2. It is suggested that you should determine your basic fitness so that you can have the best planning when doing physical activity. It is also highly recommended that you have your blood pressure evaluated and consult your doctor before you join the event.
3. If you are not feeling well because of a temporary illness such as cold or fever, please join the event after you feel better.
4. If you are or May be pregnant, please talk to your doctor before you join this event.
5. You should start the activity slowly and build up gradually. This is the safest and easiest way to go.
6. If you have the above health changes, tell your doctor or the coach. Ask whether you should continue this event.
7. If you know of any other reasons such as safety, disease, or condition changes that May influence you to join the event, you should notice the GAHK in writing.
8. If necessary, the GAHK has the right to request your medical certificate for reference.
9. If you have any questions of this physical activity readiness, please consult your doctor before you join the event.