

The Gymnastics Association of Hong Kong, China Aerobic Gymnastics talent (Preparation) Training Course (8-9/2022)

Aim:	Through systematical training, develop young gymnasts to become the members		
	of Aerobic Gymnastics Talent / Squad		
Target:	6 to 30 year old and interested in Aerobic Gymnastics		
Venue:	1/F Activity Room or 7/F Squash Court, YMCA (Kowloon Centre)		
	(23 Waterloo Road, Kowloon)		
Date:	7,14,21 Aug 18,25 Sep 2022 (SUN)		
Time:	12:00 – 14:00	14:00 – 16:00	
Number of participants:	15 (First come, first serve)	30 (First come, first serve)	
Fee:	\$750		
Coach:	Hong Kong Team Coach or GAHK registered coach		
Deadline:	28 July 2022 (Thu)		
Application:	 I. Online Application: https://forms.gle/31GBbqbakZXttLwn9 and send the cheque to GAHK II. Fill in the application form and the cheque (Heading: The Gymnastics Association of Hong Kong, China) to "Room 1002, Olympic House, 1 Stadium Path, Causeway Bay, HK". 		
Noted:	I. All fee will not be refunded when application is accepted II. Applicants will receive the conformation by email before class		
	explain and admission		
	IV. There is potential risk of gymnastics. To ensure the safety of participants, GAHK recommended participants to purchase their own insurance		
Inquiry:	Tel.: 2504 8233 Fax: 2882 8590		
	Website: www.gahk.org.hk Email: mail@gahk.org.hk		

The Gymnastics Association of Hong Kong, China 中國香港體操總會

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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 <u>and</u> 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.



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Application form

Name : (CHI)		(ENG)		
Gender:	Age:	DOB:	(dd/mm/yy)	
Address:				
Email:	mail : Phone :			
School:	Class :			
Time: 12:00 -	14:00 / 14:00 – 16:00			
I agree that the	e above information will be	retained for the promotion and commun	ication of our aerobics gymnastics activities	
If you would like to	change or inquire about the p	personal information you have declared,	please contact our staff.	
		Declaration		
	(The parents / guar	rdians of applicants aged below 18	must sign this form)	
I certify that I am	entering this competition	at my risk and responsibility. I ag	reed to abide by the regulations, policies and	
anti-doping policy of	of The Gymnastics Associa	tion of Hong Kong, China. I for my	self, my executors and administrators, do hereby	
waive and release, a	any and all rights, claims a	nd causes of action I have or May have	ve against The Gymnastics Association of Hong	
Kong, China and al	l sponsors, promoters, supp	porters and all other contributors from	any and all liability arising from illness, injury	
death, loss and eco	nomic consequences I Ma	y suffer as a result of my entry in th	is event from any cause whatsoever, including	
negligence. I certify	that I am physically fit ar	nd sufficiently trained to compete for	the completion of this event. I grant permission	
and assign all rights	s, title and interest to the or	ganizer to utilize my appearance, nan	ne voice biodata and likeness in connection with	
the race in any and	all media throughout the wo	orld in perpetually and agree to waive	any rights of inspection or approval associated.	
I have read and und	erstood the declaration and	Physical Activity Readiness (Append	ix I).	
Date:		Name of Guidance:		
	icant:	Signature of Guidanc	e:	
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 $[\]ast$ The information will only be used for this event.