The Gymnastics Association of Hong Kong, China 中國未提贈場頒命

中國香港體操總會

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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)

Children and Youth Courses Women Artistic Gymnastics (L4 or above)

Course Code	Date		Time	Age	Fee (Course Fee & Insurance)	
					Member	Non-member
AGS260-1516(A)		10:00am – 12:00nn	5-11 years old			
AGS260-1516(B)		ſ	12:00nn – 2:00pm	12-16 years old	\$1,570	\$1,670

Venue: Gymnastics Hall, Shun Lee Tsuen Sports Centre (Shun Lee Tsuen Road, Kwun Tong)

Important Notes

- 1. If finally the no. of applicants is less than 10, we may consider to group the class into one and time will be changed to 11:00am -1:00pm. Applicants will be individually noticed via email;
- 2. Quota: 8 pax (priority enrollment for current students, first come first serve);
- 3. Deadline for application: October 7, 2015;
- 4. New applicants should attach a copy of the L3 Artistic Gymnastics Certificate for verfication;
- 5. Applicants please send the entry form with a crossed cheque made payable to "The Gymnastics Association of Hong Kong, China" to the following address for confirmation: Room 1002, Olympic House, 1 Stadium Path, So Kon Po, Causeway Bay, Hong Kong;
- 6. For any enquiries, please feel free to contact Ms. Sonia LAM at 2504 8233.

Children and Youth Courses Application Form

Office Only:	ver.8/2015				
Cheque No.:					
Receipt No.: R					

Please put a ✓ in the appropriate boxes: 1. Course code: AGS260-1516 (A)	AGS260-1516 (B)
2. Member status: Member (No:) Non-member	
Course code of last course (if any):	
Name: (Chi)	(Eng)
Gender : <u>M / F</u> Age : DO	B: YYYY MM DD
Tel: (Day)	(Mobile)
Fax: Email: _	
Address:	
*Please kindly provide you email address in order to	o receive the latest information of the training.
(The parents / guardians of pa	Declaration articipants aged below 18 must sign this form)
regulations, policies and anti-doping policy of myself, my executors and administrators, docauses of action I have or may have against sponsors, promoters, supporters and all othe injury death, loss and economic consequence cause whatsoever, including negligence. I cert for the completion of this event. I grant perm to utilize my appearance, name voice biodata	on at my risk and responsibility. I agreed to abide by the of The Gymnastics Association of Hong Kong, China. I for the one hereby waive and release, any and all rights, claims and all responsibilities. The Gymnastics Association of Hong Kong, China and all recontributors from any and all liability arising from illnesses. I may suffer as a result of my entry in this event from any tify that I am physically fit and sufficiently trained to compete hission and assign all rights, title and interest to the organizer and likeness in connection with the race in any and all media to waive any rights of inspection or approval associated. d Physical Activity Readiness (Appendix I).
Name of Parents/Guardians:	Signature:
Name of Applicant:	Date :

The Gymnastics Association of Hong Kong, China

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 <u>any other reasons</u> 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.