



The Gymnastics Association of Hong Kong, China

Membership Application / Renewal Form 2024-2025



Membership period: 1st April 2024 – 31st March 2025

Application Procedure

1. Please complete the form, membership fee and a self-addressed envelope with a \$2.2 stamp by mail or in person. (Crossed Cheque: Payable to "The Gymnastics Association of Hong Kong, China)
2. Please affix a recent passport size photo at the top right corner. Otherwise, your application will not be processed.
(If you have any enquiries, please contact our staff at 2504 8533.)

Membership Category:

Ordinary Member – HK \$ 80 / year

* First Application Renewal (Membership No. _____)

* Please tick the appropriate box.

Personal Particulars

Name : * (Eng) _____ (Chi) _____ Date of Birth: (dd/mm/yyyy*) _____

Correspondence (Chi) _____

Address : * (Eng) _____

Contact: * (Mobile) _____ (Home) _____

* (Email) _____

***Must provide**

Participants aged below 18 must sign by their parents or guardians

Information of parents / guidance	Chi. Name : _____	Contact No. : _____
	Eng. Name : _____	Relationship : _____

GAHK (the association) respects and protects your privacy. The association will not sale, rent and transfer your data to anyone or any organizations. We undertake to comply with the requirements of the Ordinance to ensure that your personal are kept accurately and securely.

I hereby apply for membership of the The Gymnastics Association of Hong Kong, China.
I agree to abide by constitution and rules of the association willing to join GAHK's membership.

Date : _____ Signature of Applicant / Guidance : _____

For Official Use Only

Date : _____ Membership No. : IND _____
Cash / Cheque : _____ Receipt No. : R _____



中國香港體操總會

2024-2025 年度

個人會員申請表

會籍有效日期：2024 年 4 月 1 日至 2025 年 3 月 31 日

貼上照片

一張近照

4cm x 4cm

申請手續

- 填妥申請表格連同 \$2.2 回郵信封及劃線支票 (抬頭請書：中國香港體操總會) 郵寄或親臨辦公室辦理
- 請於表格右上角貼上照片，否則申請不獲受理
(若有任何疑問，歡迎致電 2504 8233 與本會職員查詢。)

會籍類別：

普通會員 – 港幣 \$ 80 / 年

申請項目 * 新會員 續會 (會員號碼 _____)

* 請在適當的方格加上 ✓ 號。

個人資料

姓名： * (中文) _____ * (英文) _____ 出生日期：____年*____月____日

通訊地址： * (中文) _____

(英文) _____

聯絡方法： * (手提) _____ (住宅) _____

* (電郵) _____

*必須填寫

未滿 18 歲的申請人，必須由家長或監護人填寫此欄

家長或監護人記錄	中文姓名：_____	聯絡電話：_____
	英文姓名：_____	關係：_____

本會將會遵守《個人資料 (私隱) 條例》中所列載的最新規定。本會將不會以任何形式出售、租借及轉讓 閣下的資料予任何人士或組織。本會將確保妥善保存個人資料。

本人願意遵守總會會章及規則並希望申請成為會員

申請日期：_____ 申請人 / 監護人簽署：_____

此欄由會方專用

入會日期：_____

會員編號：IND _____

現金 / 支票：_____

收據號碼：R _____