



Hong Kong, China Tenpin
Bowling Congress Limited

我要上全運



第十五屆全國運動會群眾賽事保齡球項目香港特區運動員代表甄選賽
啟德體育園保齡球中心 - Top Bowl
香港啟德體育園啟德零售館 1 號 3 樓 301-302 號

**Selection of Bowling Athletes
for the Mass Participation Events of the 15th National Games
Kai Tak Sports Park Bowling Centre - Top Bowl
Shop. 301-302, 3/F, Kai Tak Mall 1, Kai Tak Sports Park, Kowloon, Hong Kong**

報名表 ENTRY FORM

- 賽事 : 第十五屆全運會群眾賽事香港特區男子及女子代表隊甄選賽
EVENT Selection of the Men and Women Team for the Mass Participation Events of the 15th National Games
- 日期 : 2025 年 4 月 5 日 (星期六) April 5, 2025 (Saturday) 10:00 – 17:30
DATE 2025 年 4 月 6 日 (星期日) April 6, 2025 (Sunday) 10:00 – 17:30
- 後備日期 Fallback Date:
2025 年 4 月 12 日 (星期六) April 12, 2025 (Saturday) 10:00 – 17:30
- 場地 : 啟德體育園保齡球中心 - Top Bowl (香港啟德體育園啟德零售館 1 號 3 樓 301-302 號)
VENUE Kai Tak Sports Park Bowling Centre - Top Bowl
(Shop. 301-302, 3/F, Kai Tak Mall 1, Kai Tak Sports Park, Kowloon, Hong Kong)
- 報名費 : 費用全免
ENTRY FEE FREE of Charges

球員名字及出球順序 Name & Line-up			
<input type="checkbox"/> 男子隊 Men Team		<input type="checkbox"/> 女子隊 Women Team	
請在合適的空格上填上別號 Please put a tick in the correct box			
中文姓名 Chinese Name	英文姓名 English Name	證件類型 Type of Certificate	證件編號 Certificate No.
(1)			
(2)			
(3)			
(4)			
(5)			

證件類型 Type of Certificate : 香港永久性居民身份證 - HKID ; 香港特區護照 - HKSAR Passport ; 港澳居民來往內地通行證 - MTP

聯絡人 Contact Person : _____ 聯絡電話 Tel No.: _____

電郵地址 E-mail Address : _____



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All participants and participants aged 18 or below must submit the Disclaimer and Participant Agreement signed by his/her parent or guardian
所有參賽者及未滿十八歲之參賽者必須由家長或監護人簽署此免責聲明

DISCLAIMER & PARTICIPANT AGREEMENT **免責聲明及參加者同意書**

Selection of Bowling Athletes for the Mass Participation Events of the 15th National Games 第十五屆全運會群眾賽事香港特區運動員代表甄選賽

Name 參賽者姓名: _____ Sex 性別: _____

Type of Certificate 證件類型: _____ Certificate No. 證件號碼: _____

本人謹此聲明，上述姓名的參加者身體健康、體能良好並適合參與「第十五屆全運會群眾賽事香港特區男子及女子代表隊甄選賽」。如參加者因個人疏忽或健康及體能上的不足而導致受傷或死亡，主辦機構及協辦機構將不需為上述參加者在活動中遭受的任何傷害或死亡負責。如參加者的行為疏忽而導致第三者受到任何損失、傷害、受傷或死亡，參加者或其監護人須承擔主辦機構及協辦機構所面對的任何索償及要求。

I declare that the name listed above (“the Participant”) is healthy, physically fit, and suitable to participate in “Selection of the Men and Women Team for the Mass Participation Events of the 15th National Games” (“the Tournament”). The Organizer and Co-Organizer shall not be liable for any injury or death which the Participant may suffer in the Tournament, if the cause of injury or death is due to his/her own negligence or inadequacy in health and fitness. I undertake to indemnify The Organizer and Co-Organizer against all actions, claims and demands by any person who suffers or sustains any loss, damages, injury or death arising out of or as a result of the participant’s acts due to his/her negligence.

Parent / Guardian’s Signature
(For Participant aged under 18)
家長/監護人簽署
(適用於未滿18歲之參賽者)

Participant’s Signature
參賽者簽署

Date
日期

Parent / Guardian’s Name
家長/監護人姓名

Parent / Guardian’s Tel
家長/監護人聯絡電話