



主辦機構



贊助機構

2016-2017 年度足動全城女子七人賽(小學組)
2016-2017 Wofoo's School 7-a-side Football Cup (Primary School Division)

報名表格 APPLICATION FORM

學校名稱(中文): _____

School Name (English): _____

學校地址 School Address: _____

學校電郵 School Email: _____

球衣顏色 Jersey Colours

主色 1st Colours: _____ 背心顏色 Reserve Colours: _____

注意: 主色和背心顏色必須有明顯分別

學校領隊 Team Manager (必須為年滿 21 歲香港居民 Must be a Hong Kong resident aged 21 or over)

姓名 Name: (中文) _____ (English) _____

香港身份證號碼 HKID No.: _____ 出生日期 Date of Birth: _____

手提電話 Mobile No.: _____ 辦公室電話 Office Phone No.: _____

傳真號碼 Fax No.: _____ 電郵 Email: _____

保證金 Deposit HK\$500

支票號碼 Cheque No.: _____

銀行名稱 Bank Name: _____

本校願意遵守比賽之規章及所有之判決。本校/球隊亦會為各球員購買活動保險及已獲球員的家長或監護人的同意，其子弟身體健康，適宜參與本賽事。本校/球隊同意上述提供之學校領隊聯絡資料將用作為足總聯絡之用，並同意由足總發放有關資料予其他參賽球隊作聯絡之用途。

My SCHOOL guarantees to obey all the rules & regulations of this competition and decisions of the relevant committee. My SCHOOL/TEAM has arranged our own insurance coverage for the players and got the consent from the parent or guidance of the players that their children are healthy and suitable to participate in this competition. My SCHOOL/TEAM agreed that the contact details of our Team Manager will be made available to HKFA staff and other participating teams for the communication purpose.

學校蓋章
Seal of School

校長簽署
Signature of Principal

日期
Date