



2019-2020 年度賽馬會五人足球盃(學校組)
2019-2020 Jockey Club Futsal Cup (School Division)

學校參賽確認信

School Participating Confirmation Letter

本校將派隊參與 2019-2020 年度賽馬會五人足球盃(學校組)，參賽資料如下：

學校名稱 (中文)： *

School Name (English)： *

參賽學校可申請報名多於一個年齡組別，請於以下表格欲參賽之組別填上“√”號。

Each school can apply for more than 1 category. Please indicate with a “√” in the designated Division

組別 Division
<input type="checkbox"/> 小學 10 歲以下男女子混合組別* Mix U10, Primary School*
<input type="checkbox"/> 小學 13 歲以下男子組別 Boys' U13, Primary School
<input type="checkbox"/> 小學 13 歲以下女子組別 Girls' U13, Primary School
<input type="checkbox"/> 中學 15 歲以下男子組別 Boys' U15, Secondary School
<input type="checkbox"/> 中學 17 歲以下男子組別 Boys' U17, Secondary School
<input type="checkbox"/> 中學 17 歲以下女子組別 Girls' U17, Secondary School

*小學 10 歲以下男女子混合組可以為全男、全女或男女混合參賽。

*Combination of Mix U10, Primary School, players can be all male, all female or mix.

本校/球隊願意遵守比賽之章則所有之判決。 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。此外，本校/球隊確認所提供予足總有關學校、聯絡人、賽事監督員及參賽球員資料正確，並同意供足球作本賽事運作用途。

My SCHOOL/TEAM 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. My SCHOOL/TEAM confirmed that the school, contact person, Team Manager and Players information provided to HKFA is correct and agreed to use in operation of this competition.

學校蓋章
Seal of School

校長簽署
Signature of Principal

日期
Date