THE HONG KONG FOOTBALL ASSOCIATION LIMITED
香 港 足 球 總 會 有 限 公 司

HKFA D Coaching Certificate Course Coaching Practise Log Form

Name： _____ Course： _____ Contact No.： _____

Date	Service	Time	Place	Coach/Organization Name	Signature of Coach/Contact Person of Organization	Hours

Signature of Contact Person of Organization： _____

Name of Contact Person of Organization： _____

Position： _____

Organization Official Chop： _____

Contact No.： _____

E-mail： _____

Remarks：

1. Other than service of HKFA and school, please attach leaflet of activity from the organization
2. Please use separate form for each organization served.
3. You can make copies of this form if necessary.
4. Please mail or hand in the original copy of this form after coaching practice. HKFA will mail the approval letter within 14 working days.