

主辦機構
Organized by



22nd 香港長途拯溺錦標賽
Hong Kong Life Saving Marathon

報名表 Entry Form

資助
Subvented by



贊助
Sponsored by



長途拯溺組別 Lifesaving Group

公開男子拯救組
Open Men Lifesaving Group

公開女子拯救組
Open Women Lifesaving Group

先進男子拯救組
Master Men Lifesaving Group
(Master Age 30 or over)

先進女子拯救組
Master Women Lifesaving Group
(Master Age 30 or over)

長途自救組別 Self-survival Group

公開男子自救組
Open Men Self-survival Group

公開女子自救組
Open Women Self-survival Group

學生男子自救組
Student Boys Self-survival Group
(Student: Full time student of age 6-25)

學生女子自救組
Student Girls Self-survival Group
(Student: Full time student of age 6-25)

請於申報的組別方格上加上 ✓ 號；而每份表格只限申請一個參賽組別。

Please put a ✓ against the Group you would like to participate. Each Entry Form should be used for applying one Group only.

	中文姓名 Name in Chinese	英文姓名 Name in English	身份證明文件號碼 ID No.	年齡 Age	電子郵件地址 (如有可以填寫) Email Address	核實拯溺資格 Verification (✓)	泳帽編號 Swimming Cap No.
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							

(辦事處專用 Official use only)

附註 Notes:

- (1) 所有參賽者請閱畢比賽章程後才報名 Please read the prospectus before submitting an entry.
- (2) 請用正楷填寫所有資料，以便記錄及打印證書之用 Please complete the Entry Form in Block Letters.
- (3) 每位參賽者必須填妥「聲明書」，如不敷應用可自行影印 Participants should complete the "Declaration". Please make extra copies by photocopying.
- (4) 十八歲以下參賽者，請連同家長同意書一併交回 Participants aged under 18 should submit letter of parent's consent form together with the Entry Form.
- (5) 本人聲明，據本人所知及相信，以上資料均正確無誤。本人明白以上資料如有失實，大會有關取消參賽資格 I declare that all the provided information is correct and complete to the best of my knowledge and believe. I understand that if any of the information in this application form is incorrect, the organizer has the right to disqualify me from the competition.

個人報名表 Individual Entry

聯絡人姓名 Contact Person	聯絡電話 Contact No.
電郵地址 Email Address	
簽署 Signature	日期 Date

當天緊急聯絡人及電話 Emergency Contact Person
(個人名義及團體名義報名均需填寫)
(For both Individual and Group Entry)

姓名 Name
電話 Contact No.

團體報名表 Group Entry

聯絡人姓名 Contact Person	聯絡電話 Contact No.
電郵地址 Email Address	
團體負責人簽署 Signature	日期 Date

團體印鑑 Official Chop

團體印鑑 Official Chop	
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閣下所提供的資料只用於本會報名事宜及活動之用。在遞交申請表後，如欲更改或查詢閣下申報的個人資料，可與本會職員聯絡。
The information you provided would solely be used for the application and operation of the activity. Please contact HKLSS Staff for any amendment to or enquiry on information submitted.