

申請使用九龍京士柏加士居道 20 號西洋波會體育設施,學校,青少年及制服團體及由社會福利署資助的非政府組織,本地體育協會和政府部門。

預訂:一般 - 提前 28 天。 優先 - 提前 42 天。 國際活動 - 最多提前 1 年。

Application for use of Sporting Facilities at Club de Recreio 20 Gascoigne Road, King's Park, Kowloon, by Schools, Youth & Uniformed Groups and Non-Governmental Organizations receiving subvention from Social Welfare Department, National Sports Associations and Government Departments.

Bookings: Normal - 28 days in advance. Priority - 42 days in advance.

International Events – Up to 1 year in advance.

| 1. | 申請人姓名 Name of Applicant: | | | | |
|-----|---|---------------------|--------------------------|--|--|
| 2. | 香港身份證號碼 HKID Card no | 3. 職位 Position I | Held: | | |
| 4. | 所代表機構/團體的名稱 Name of Organization Represented: | | | | |
| 5. | 機構/團體的郵遞地址 Postal Address of Organization: | | | | |
| 6. | 電話號碼 Tel. No | 7. 傳真號碼 Fax No | <u> </u> | | |
| 8. | 電郵地址 Email Address: | | | | |
| 9. | 機構/團體的相關註冊證書號碼 No. of Relevant Registration Certificate of Organization: | | | | |
| 10. | 擬租用的設施 (請註明數量) Facilities Required: (Please specify the number required): | | | | |
| | 羽毛球場 | 網球場 | 草地位置 | | |
| | Badminton Court | Tennis Courts | | | |
| | 室外草地滾球場 | | 室內草地滾球場 | | |
| | Outdoor Lawn Bowls Rink | | Indoor Bowls Carpet Rink | | |

曲棍球場 ____ Hockey Pitch

| 11. | 用途 Purpose of use: | | | | |
|-----|--|------------------------|------------------------------|------------------|--|
| 12. | 租用日期 (請列明) Date(s) of Use: (Please specify): | | | | |
| 13. | 租用時間 (請列明) Time of Use: (Please specify): | | | | |
| 14. | 預計參加人數 Estimated Number of Participants: | | | | |
| 15. | 會否向參加者收取費用 Will you collect fees/charges from the pa 如會,收費多少? If yes, how much? | articipants? | 會/不會* *Yes/No 每位 \$ | _元 per person | |
| 16. | 活動會否帶來其他收入 | | | | |
| 17. | 活動的負責人(請提供兩名負責人的姓名,其中一名負責人必須在已預訂的時段到有關場地取場。) Name of responsible persons of the event (Please provide the names of two responsible persons, one of whom must be present at the booked session to take up the booking at the venue.): 負責人(A) Responsible person (A) | | | | |
| | 先生/女士* *Mr/Miss/Ms/Mrs | 職位 Position I | Jald: | | |
| | 香港身份證號碼 | Position Held: 電話號碼 | | | |
| | | | act: | | |
| | 負責人(B) Responsible person (B) | | | | |
| | 先生/女士* | 職位 | | | |
| | *Mr/Miss/Ms/Mrs | | Held: | | |
| | 香港身份證號碼 | 電話號碼 | | | |
| | HKID Card No | Tel. Cont | tact: | | |

| 本人代表(機構/團體 | 名稱) (下稱「本機構/團體」作 | | | | | | |
|--|----------------------------------|--|--|--|--|--|--|
| 出承諾,如是項申請獲得批准,在收到西洋波會發 | 出的付款通知書後,本人會即時 | | | | | | |
| 支付租用該體育設施的所有費用;如設施在本機構 | | | | | | | |
| 本人會支付有關的修理費用;以及如在該段期間有 | | | | | | | |
| 物遭到損壞或破壞、失竊或被移走,本人亦會支付 | | | | | | | |
| 的費用。本人聲明,上述申請是因本機構/團體舉 | 辦活動而提出,所提供的資料均 | | | | | | |
| 屬正確。 | | | | | | | |
| If this application is successful, I, on behalf ofof Organization)(the Organization), undertake to pay | Name (Name | | | | | | |
| of the sports facilities immediately upon the receipt of Advice of Payment issued by Club | | | | | | | |
| de Recreio. I also undertake to meet the cost of re | pairing any damage caused to the | | | | | | |
| facility/facilities, and of repairing or reinstating or re | | | | | | | |
| fitting or other property damaged or destroyed, stoler facility/facilities by the Organization. I declare that | <u> </u> | | | | | | |
| purpose of organizing activity by the Organization, an | | | | | | | |
| is true and correct. | | | | | | | |
| 本人已閱悉並承諾遵守最新的《西洋波會體 | 育設施使用條件》(網址: http:// | | | | | | |
| www.clubderecreio.org/condition/en/index.html) 。 在 | | | | | | | |
| 人士在使用設施時因疏忽而引致任何人士蒙受財 | | | | | | | |
| 亡,以致有關人士向西洋波會提出任何訴訟、申索 | 以家水,本人必須问四沣波曾作 | | | | | | |
| 出彌償。 | | | | | | | |
| I have read the latest Conditions of Use of | - | | | | | | |
| (Website: http:// www.clubderecreio.org/condition/e | | | | | | | |
| observe the conditions. During the hire period, I shall all actions, claims and demands by any person who su | • | | | | | | |
| injury or death arising out of or as a result of the use | • | | | | | | |
| person authorized by me due to my negligence or the | | | | | | | |
| person. | | | | | | | |
| 申請人簽署 | | | | | | | |
| | | | | | | | |
| Signature of Applicant. | | | | | | | |
| 申請人姓名(正楷)和職位 | | | | | | | |
| Name in Block Letters and Position of Applicant: | | | | | | | |
| □ #H | | | | | | | |
| 日期 Date: | | | | | | | |
| Date. | | | | | | | |
| 機構/團體印章 | | | | | | | |
| Official Chop of Organization: | | | | | | | |

* 請刪去不適用者 Please delete as appropriate