



香港拳擊總會
HONG KONG BOXING ASSOCIATION
報名表

附件.一

Entry Form

賽事名稱： _____ 比賽日期： _____ 地點： _____
Event Name _____ Event Date _____ Venue _____
屬會： _____ 聯絡電話： _____
Club _____ Tel. : _____

裁判/評判姓名 Referee/Judges Name and Family Name	義務工作人員姓名 Volunteer Name and Family Name
(C)/ (E)	(C)/ (E)
(C)/ (E)	(C)/ (E)
(C)/ (E)	(C)/ (E)

運動員 Athletes

項目 Item	級別 Weight Categories	運動員姓名 Name and Family Name	性別 Sex	出生日期 Date of Birth
Boxing / Muaythai / Kickboxing	KG	(C)/ (E)	M/F	
Boxing / Muaythai / Kickboxing	KG	(C)/ (E)	M/F	
Boxing / Muaythai Kickboxing	KG	(C)/ (E)	M/F	
Boxing / Muaythai / Kickboxing	KG	(C)/ (E)	M/F	
Boxing / Muaythai / Kickboxing	KG	(C)/ (E)	M/F	
Boxing / Muaythai / Kickboxing	KG	(C)/ (E)	M/F	
Boxing / Muaythai / Kickboxing	KG	(C)/ (E)	M/F	
Boxing / Muaythai / Kickboxing	KG	(C)/ (E)	M/F	

聲明：本人健康及體能良好，自願參與是次拳擊活動，並願意承擔財物損失和傷亡之責任，有關合辦機構及人仕均無需負上任何責任。

Declaration : I certify that I am physically fit and fully understand that I am joining the program at my own risk and shall be liable for any loss of property or injury to my person. The relevant presenting organization(s) is/are hereby indemnified at my own risk and responsibility.

所屬拳會簽署或蓋章 _____ 日期 _____

Authorized Signature or chop of Club _____ Date

(如未滿十八歲者，需家長或監護人簽署。If applicant is under 18, this form must be signed by signed by Parent / Guardian.)

家長 / 監護人簽署 _____ 家長 / 監護人姓名 _____ 日期 _____
Signature of Parent / Guardian _____ Name of Parent / Guardian _____ Date