

請依照香港身份證/護照/旅遊證件上之姓名填寫 As shown on the HK Identity Card/Passport/Travel Document
(請以正楷填寫 Please fill in in block letters)

參賽者姓名： Name of Participant:	出生日期(日/月/年)： Date of Birth (DD/MM/YYYY):
香港/澳門身份證號碼： HK/Macau Identity Card No.:	性別： Gender:
護照/旅遊證件號碼： Passport/Travel Document No.:	國籍： Nationality:
所屬團體： Name of Organization:	電郵地址： Email Address:
通訊地址： Correspondant Address:	
18歲以下參賽者家長/監戶人姓名： Name of parent/guardian of participant aged under 18:	聯絡電話： Contact Number:

請在適當的 劃上「✓」。Please mark "✓" on where appropriate.

請選擇參賽組別 Please select a Group: <input type="checkbox"/> 小學組 Primary <input type="checkbox"/> 中學組 Secondary <input type="checkbox"/> 成年組 Adults		
參賽項目不限，可選多項 THE OPTIONS ARE NOT LIMITED; YOU CAN CHOOSE MULTIPLE ITEMS.		
太極類： Tai Chi:	<input type="checkbox"/> 八法五步 Bafu Wubu Taijiquan <input type="checkbox"/> 吳式太極拳 Wu Style Taijiquan <input type="checkbox"/> 陳式太極拳 Chen Style Taijiquan <input type="checkbox"/> 楊式太極拳 Yang Style Taijiquan <input type="checkbox"/> 42式太極拳 42-Forms Taijiquan <input type="checkbox"/> 24式太極拳 24-Forms Taijiquan <input type="checkbox"/> 孫式太極拳 Sun Style Taijiquan <input type="checkbox"/> 陳式新規太極劍 Chen Style New Rules Taijijian <input type="checkbox"/> 楊式新規太極劍 Yang Style New Rules Taijijian <input type="checkbox"/> 42式太極劍 42-Style Taijijian <input type="checkbox"/> 32式太極劍 32-Style Taijijian <input type="checkbox"/> 其他自選太極類，項目名稱 Other self-selected Taijiquan forms, please specify _____	
武術類： Wushu:	<input type="checkbox"/> 長拳 Changquan <input type="checkbox"/> 刀術 Daoshu <input type="checkbox"/> 劍術 Jianshu <input type="checkbox"/> 棍術 Gunshu <input type="checkbox"/> 槍術 Qiangshu <input type="checkbox"/> 南拳 Nanquan <input type="checkbox"/> 南刀 Nandao <input type="checkbox"/> 南棍 Nangun <input type="checkbox"/> 其他自選武術類，項目名稱 Other self-selected martial arts forms, please specify _____	
傳統類 Traditional Martial Arts:	<input type="checkbox"/> 詠春 Wing Chun <input type="checkbox"/> 蔡李佛 Choy Li Fut <input type="checkbox"/> 洪拳 Hung Gar <input type="checkbox"/> 八卦掌 Bagua <input type="checkbox"/> 形意拳 Xing Yi	
養生類 Daoyin Yangsheng / Health Qigong:	<input type="checkbox"/> 八段錦 Baduanjin <input type="checkbox"/> 五禽戲 Wuqinx <input type="checkbox"/> 易筋經 Yi Jin Jing <input type="checkbox"/> 其他養生功，請注明套路名稱 Others, please specify _____	
1) 報名費用： Registration Fee:	HK\$150 (每位參賽者只須繳交一次) HK\$150 per person (one-time fee)	HK\$150.00
2) 參賽費用： Participation Fee:	個人項目：每項HK\$300 + 其後_____項，每項加HK\$100 HK\$300 for the first event + _____ event and HK\$100 for each subsequent event.	HK\$
合共 TOTAL:		HK\$

聲明及同意書：1.本人聲明自願參加香港太極青年慈善基金有限公司所舉辦之賽事。2.本人聲明「個人項目報名表格」內所填報的資料均屬正確和完整無誤。本人明白此「個人項目報名表格」內所填報的任何資料如有失實，即告無效。本人是次比賽資格亦同時被取消，已繳之報名費用也不會退還。3.本人同意主辦單位可以利用任何方式錄影、拍攝和記錄本人參賽的活動和整個賽事，一切版權均屬於主辦單位所擁有。本人確認主辦單位有絕對權利於任何媒體使用或發放包含有本人肖像的錄製品、照片或任何類型的產品，本人不得向主辦單位追討任何費用或報酬。4.本人同意香港太極青年慈善基金有限公司擁有是次比賽活動內容的一切權益。在未經主辦單位書面向意前，本人同意不會直接或間接將比賽片段、活動內容、表演片段、影音製作及照片上載任何媒體、刊登或以任何形式公開發佈或分享傳閱，或作任何商業或非商業性用途。本人確認主辦單位有權保留一切追究權利。5.本人同意遵守主辦單位所訂的是次比賽和場地規則，並會服從一切指示和決定。主辦單位和裁判有最終決定權，本人同意不會作出任何投訴。如有違反規則或不遵守紀律，本人願意接受主辦單位裁決。6.本人謹此聲明身體健康，並適宜參加是次比賽活動。若於活動中發生任何意外或傷亡事故，本人同意自負責任，並聲明本人和家屬不會向主辦單位、協辦單位或其工作人員提出任何索賠要求或追究。7.若因任何事故不能參加比賽，本人明白所報名費用概不退還。

收集個人資料聲明：香港太極青年慈善基金有限公司對其所持的個人資料將會保密，但主辦單位可以將參賽者提供的個人資料用作聯絡通訊、籌款、推廣活動、研究調查及其他通訊及推廣之用途。若參賽者不希望主辦單位將參賽人的資料用於上述用途，請將中英文全名及電話號碼、電郵予主辦單位(general@hktyc.org)以安排相關刪除手續。如有查詢，請WhatsApp 6744 8288與主辦單位聯絡。

Declarations and Consents: 1) I hereby declare my voluntary participation in the event organized by the Hong Kong Tai Chi Youth Charity Foundation Limited. 2) I declare that the information provided in the forms above are accurate, complete, and true. I understand that if any information in this form is found to be false, it will be deemed invalid, and my eligibility to participate in this competition will also be canceled, with no refund of the registration fee. 3) I agree that the organizing unit may use any means to record, film, and document my participation in the event and the entire competition, with all copyrights belonging to the organizing unit. I confirm that the organizing unit has the absolute right to use or distribute recorded materials, photographs, or any products containing my likeness in any media, and I will not claim any fees or compensation from the organizing unit. 4) I agree that the Hong Kong Tai Chi Youth Charity Foundation Limited holds all rights to the content of this competition. Without written consent from the organizing unit, I agree not to directly or indirectly allow any competition footage, event content, performance clips, audiovisual productions, and photographs to be uploaded to any media, published, or shared in any form or used for any commercial or non-commercial purposes. I confirm that the organizing unit retains all rights to pursue any claims. 5) I agree to adhere to the rules set by the organizing unit regarding the competition and venue, and I will follow all instructions and decisions. The organizing unit and the judges have the final decision-making authority, and I agree not to make any complaints. In the event of any violation of rules or failure to adhere to discipline, I am willing to accept the organizing unit's decision. 6) I hereby declare that I am in good health and fit to participate in this competition. Should any accidents or injuries occur during the event, I agree to take full responsibility and declare that neither I nor my family will make any claims against the organizing unit, co-organizers, or their staff. 7) I understand that if I am unable to participate in the competition for any reason, the registration fee is non-refundable.

Personal Data Collection Statement: The Hong Kong Tai Chi Youth Charity Foundation Limited will keep the personal data it holds confidential. However, the organizing unit may use the personal data provided by participants for communication, fundraising, promotional activities, research, and other communication and promotional purposes. If participants do not wish for their personal data to be used for the above purposes, please send your full name (in Chinese and English) and phone number via email to the organizing unit at general@hktyc.org to arrange for deletion. For inquiries, please contact the organizing unit via WhatsApp at 6744 8288.

(請刪去不適用 Please delete if not applicable)

參賽者/18歲以下家長/監戶人簽署： _____ 日期： _____
Participant / Parent / Guardian of participant aged under 18 signature: _____ Date: _____

查詢請聯絡 For enquiry, please contact:

香港參賽者 Hong Kong Participants

內地、澳門及海外參賽者 Mainland China, Macau and Overseas Participants

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