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國際康體專才培訓學院
INTERNATIONAL PERSONAL
TRAINERS & FITNESS ACADEMY

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 Tsimshatsui, Kowloon
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JOINT ENROLLMENT FORM 合辦課程報名表

Course Name (課程名稱):

Personal Information 申請人資料

Name (姓名) _____

English (英文) _____ Chinese(中文) _____

Date of Birth (出生日期) _____ HKID Card / Passport No. _____
 (身份證/護照號碼)

Sex (性別) _____ Age (年齡) _____ Occupation (職業): _____

Address (地址) _____

Tel No. (聯絡電話) _____ Day-time (日間) _____ Night-time (晚間) _____

Fax No. (傳真號碼) _____ E-mail (電郵地址): _____

Related work experiences and current certificates (有關工作經驗及証書): _____

Information Source (從那裡得知本學院課程)

Recruit 招職 網頁 朋友介紹 SMS 短訊 其他, 請列明: _____

All the personal data will keep confidential and will only be used in the application procedure of the events organised by our Academy. For any change of your personal data, please contact Miss Tse at 2345-6286.

所提供的資料只用於本學院的康體活動報名事宜及活動之用。在遞交表格後如欲更改或查詢你申報的資料, 可與本學院職員聯絡。

Declaration

I, _____, declare that all the personal data are true and correct. I am aware that my participation in the International Personal Trainers & Fitness Academy event(s) exposes me to a risk of personal injury and I agree to hold harmless International Personal Trainers & Fitness Academy, their Directors, employees and subsidiaries, the presenters and all the event staff from any and all liability arising from this course including, but not limited to, muscle strains, tears, pulls, broken bones, death and any and all illness, ailments or loss of personal property.

I understand the risks arising from the participation of this course and attest that I am in sound physical condition. I also understand that I may be videotaped, audiotaped and photographed during the course and International Personal Trainers & Fitness Academy may use my images for any and all uses without my prior consent. I further agree to all conditions of registration, including but not limited to, the no refund policy.

聲明

本人, _____, 謹此聲明在本表格內所提供之資料皆正確無誤, 並擁有良好健康狀況及在參加課程活動時如有任何特殊情況出現(如肌肉扭傷、撕裂、拉傷、骨折、意外、死亡、其他疾病或遺失私人財物等), 國際康體專才培訓學院及其董事、員工及所有工作人員均無需負上任何法律或金錢責任, 本人更同意國際康體專才培訓學院可保留更改課程活動之日期、時間、內容錄影、錄音及拍攝等權利。

本人謹此同意及明白章程所列之內容和條款及願意遵從。

Signature 申請人簽署: _____ Date 日期: _____

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Amount (金額): _____ Received Date(日期): _____

Receipt No. _____

Cash 現金 EPS 易辦事 Visa / Master 信用卡 12 個月分期銀行 _____ 每月額外收費 _____ %

Cheque 支票/Cheque No. 支票號碼 _____ (Bank 銀行 _____)

Issued by (經手人): _____ Refer to: (介紹人): _____