保良局賽馬會大棠渡假村申請表

PO LEUNG KUK JOCKEY CLUB TAI TONG HOLIDAY CAMP APPLICATION FORM

FOR OFFICIAL USE ONLY
App. No.: _____
Received: _____

填妥之表格可傳真至 2882 3391
Please fax completed form to 2882 3391

團體/家庭名稱 Name of Organization/Family　中文 Chinese _____　英文 English _____

聯絡人姓名 Contact Person _____　先生/女士/小姐 Mr./Ms./Miss　香港身份證號碼 HKID Card No. _____

通訊處 Address _____

電郵 E-mail _____

聯絡電話 Contact Tel. No. _____　手提電話 Mobile No. _____　傳真 Fax. No. _____

申請營期 Camping Period: 由 From _____ 至 to _____ 或 由 or From _____ 至 to _____

1/9/2019 起生效
Valid from 1/9/2019

		可租營額 Capacity of Unit	用營時間 Period	男 Male	女 Female	總數 Total	擬租用營舍數目 No. of Hostel
特選團體營 Selected Group Hostel	一廳三房(15 人) 3-bed room(15 persons)	4 間 4 units	下午 3 時 15 分 (入營) 至 翌日下午 1 時 45 分 (離營) 3:15p.m (Check-in) to the following day 1:45p.m (Check-out)				
	一廳兩房(14 人) 2-bed room(14 persons)	2 間 2 units					
團體營 Group Hostel	一廳三房(18 人) 3-bed room(18 persons)	4 間 4 units					
	一廳兩房(14 人) 2-bed room(14 persons)	2 間 2 units					
家庭營 Family Hostel	一廳兩房(6 人) 2-bed room(6 persons)	3 間 3 units					
	一廳兩房(8 人) 2-bed room(8 persons)	3 間 3 units					
	一廳三房(10 人) 3-bed room(10 persons)	2 間 2 units					
露營(4 人) (不包露營用品) Tent Camp (4-person) (Camping supplies are not included)		5 個 5 units					
領袖訓練營 Leadership Training Hostel	領袖營舍(4 人) Leader room (4 persons)	3 間 3 units					
	訓練營舍(10 人) Trainee room (10 persons)	12 間 12 units					
	通舖營舍(10 人) Japanese style room (10 persons)	6 間 6 units					
日營 Day Camp			上午 9 時至下午 4 時 9:00a.m. – 4:00p.m.				
下午營 Happy Hour Camp			下午 3 時至下午 10 時 3:00p.m. – 10:00p.m.				
黃昏營 (費用已包括套餐/燒烤及糖水費用) Evening Camp(with set dinner/BQ and dessert			下午 2 時至下午 10 時 2:00p.m. – 10:00p.m.				☐套餐 ☐燒烤

備註:
此表格上之個人資料除作上述用途外，本局將不時透過直接郵遞、電郵、電話、手機短訊及傳真等途徑。向 閣下提供有關本局動向、服務推廣及籌募活動等的資訊。屆時將需要使用 閣下存於本局之聯絡資料與 閣下通訊。如不擬收取，請與保良局營務組聯絡或在以下方格內加「✓」號後交回本局。電話：2277 8678 或傳真：2882 3391。
[ ] 本人不欲收取任何如上所述的保良局宣傳郵件。

Your personal data provide in this form will be used for the above purpose. The Kuk may use your personal data in the database of the Kuk to send you the most updated information relating to our services and development through various channels such as direct mailing, email, telephone, SMS or facsimiles, etc. If you do not wish to receive such materials, please contact Recreational Services Department or put a「✓」in the box below and send back to Po Leung Kuk through Tel.: 2277 8678 or Fax: 2882 3391.
[ ] I do not wish to receive the promotion materials from Po Leung Kuk as specified above.

聲明:
本團體同人/家庭成員自當遵守 貴營簡則。用營期內倘有違反營規或發生任何意外，概由本人等自行負責。謹以本人簽名及團體印信證明本團體/家庭之申請。
We will comply with all regulations and conditions set out for the use of the camp, and will take full responsibility in the event of any violation of the regulations and conditional and any accidents howsoever caused. I certify that I have the authority to bind our group by signing this application with organization chop if applicable.

負責人姓名 Representative _____　先生/女士/小姐 Mr. / Ms. / Miss　職位 Position _____

團體印鑑及負責人簽署 Organization"s Chop & Signature _____　日期 Date _____

請將填妥之表格寄交香港禮頓道 66 號或傳真至 2882 3391 保良局康樂服務部。
Please complete this form and send it to Recreational Services Department, Po Leung Kuk, 66 Leighton Road, Hong Kong, or fax to 2882 3391.