

香港體育學院有限公司
Hong Kong Sports Institute Limited
運動課程轉班申請表
Sports Courses Transferal Application Form



請以正楷填寫表格 Please complete this form in **BLOCK LETTERS**

原有課程編號 _____ 擬轉課程編號 _____ 電腦機收據編號 _____
Original Course Code _____ Transfer to Course Code _____ Computer Receipt No. _____

姓名(中) _____ (英) _____ 學員號碼 (如適用) _____
Name(Chin.) _____ (Eng.) _____ Student No. (if any) _____

聯絡電話 (日) _____ (夜) _____
Contact No. (Day) _____ (Night) _____

傳真號碼/電子郵件 _____
Fax No./E-mail address _____

轉班原因 Reason 任何轉班申請必須於開學前七個工作天連同有關證明文件(如:醫生證明書或學校通告等)一同遞交,並需繳付手續費用港幣\$50。所繳手續費用一概不獲發還。
The transferal application shall be submitted with supporting document (e.g. Doctor's Certification or School's Notice etc.) 7 working days before the course starts and handling fee of HK\$50 will be required. All handling fees are non-refundable.

申請如被接納,若有多繳款項,香港體育學院有限公司(簡稱"體院")將以劃線支票退回多繳費用,請確定「支票抬頭人」無誤及接收退款方式。
If the application is accepted and there is overpaid amount, Hong Kong Sports Institute Limited (hereinafter known as "HKSIL") will refund the balance of course fee by crossed cheque. Please ensure that the "Payee Name" is correct and choose the collection of cheque refund.

收款人如在支票簽發日期6個月內要求體院重發支票,體院必須先行替其辦理停止支票兌現手續,才可重發支票,而有關手續費用將由收款人支付。
Should the payee requests to re-issue the refund cheque or stop the cheque payment within 6 months from the issuing date, the payee is responsible for any cost related as required by the bank.

支票抬頭人(如與學員姓名有別) _____ 身份證號碼 _____
Payee Name (If different from applicant) _____ HKID No. _____
(英文姓名 English Name)

接收支票退款方式*: 本人將親自往"體院"簽收 Collect in personal at the HKSIL
Collection of Cheque Refund 請郵寄至下列地址 Please mail to the following address

* 請 所選擇項目 Please where it is appropriate

備註 Notes

- ※ 未滿十八歲之申請人,必須由家長簽署申請。
For applicants who are under the age of 18, applications MUST be signed by parents.
- ※ 本表格之一切資料只供體院使用,在未得申請人同意情況下,體院絕不會將此表格內之個人資料外洩。
All information contained in this application form is for use by HKSIL only and will not be released for other purposes without the applicant's prior consent.
- ※ 體院保留修改上述各項資料之權利,而無須作另行通知。
HKSIL reserves the right to amend the above terms and conditions without prior notice.

申請人/家長簽署 _____ 日期 _____
Applicant/Parents Signature _____ Date _____

**此欄只供職員填寫
FOR OFFICIAL USE ONLY**

Handling Fee (Receipt No. _____) The Transferal is **ACCEPTED** **NOT ACCEPTED**

Remarks _____

RECEIVED BY: DATE:	VERIFIED BY: DATE:	HANDLED BY: CRS DATE:	APPROVED BY: CRM DATE:
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