



香港滾軸運動總會有限公司 Hong Kong Federation of Roller Sports Limited

香港銅鑼灣掃桿埔大球場徑一號奧運大樓 1016 室
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Membership Application / Renewal Form 2023-2024

Please mail or email the application form with photo, copy of identity document and proof of payment / cheque to the Federation when submitting.

If there are missing or incomplete documents, HKFRS will not process the application

Complete the following form. (Please ✓ the applicable □)

- ✧ Yearly Period: April 1 of every year to March 31 of the next year
(HK\$50.00 for One Yearly Period or HK\$100.00 for Two Yearly Period)
- ✧ Cheques should be crossed and payable to “Hong Kong Federation of Roller Sports Limited”
- ✧ Bank account: HSBC 047-899257-838

Associate Member

Amateur Recreation Membership No. (if any): _____

Period

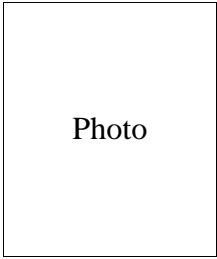
Year 2023-2024 (One Yearly Period)

Discipline

Artistic Skating Speed Skating Freestyle Skating Skateboarding
 Inline Hockey Aggressive Inline Roller Hockey Other (Please specify) _____

Personal information

Name: _____ (Chi) _____ (Eng) Date of Birth: _____ yyyy/ mm/ dd
Age: _____ Gender: _____ Nationality: _____ HKID no.: _____ (Please provide copy)
Mobile: _____ Email: _____ (Please provide valid email)
Address: _____
Name of Company / School: _____ Occupation / Grade: _____ Practice location: _____
Affiliated Club / Group (if any): _____
Contact person of Affiliated Club / Group (if any): _____ Contact no.: _____



Declaration *For applicants aged below 18, their parent / guardian's signature should be obtained*

I, _____ HKID no. _____ certify that the above information is true and correct to apply for HKFRS's Associate Membership. I also understand that if I give any false information or withhold any material information, it may be liable to disqualification from the application. I also agree to obey all rules and regulations of Hong Kong Federation of Roller Sports Limited ("HKFRS"), including Memorandum of Association, rules for Coach / Judge and etc. I understand that if I violate any rules and regulations, or the rulings of the Executive Committee of HKFRS, the membership with HKFRS will be canceled with immediate effect.

I accept the decisions made by HKFRS when participating in the HKFRS's events. I also understand that the event organizer has the rights to change anything related to the events. I certify that my health condition is suitable for the events held by HKFRS and I will not take any drugs during the events. I accept that in case of any injuries or accidents occur in any events, HKFRS, its coaches and staff members, and the activity organizer will not be required to bear any responsibility on their injuries, accidents and loss of belongings.

Applicant Signature: _____ Date : _____

Parent/Guardian's Signature: _____ (Relationship) : _____

<u>Internal use only</u>
Receive Date: _____
Method: <u>Bank Transfer / Cheque</u>
Ref. Code: (HK\$ _____)
Remarks: _____