



MONTREAL CANADIENS
CHINA HOCKEY SCHOOL IN CANADA
蒙特利尔加拿大人冰球训练营·加拿大站

I. 报名表 Participant Information

U12 / U16

(Age/年龄: 9 - 12) (Age/年龄: 13 - 16)

英文名字 First Name in English		英名姓氏 Last Name		中文姓名 Name in Chinese	
电子邮件 E-mail				手机 Mobile	
出生日期 Date of Birth (ddmmyy)				出生国家 Birth Country	
国籍 Nationality		年龄 Age		性别 Gender	
通讯地址 Postal address					

该球员是否有任何健康情况需要 CTC 特别留意? Does the player have any medical history that CTC should be aware of?

没有 No 有 Yes, 请注明 Please specify: _____

II. 学生基本信息 Participant Playing Information

比赛位置 Playing Position	*前锋 Winger / 中锋 Center / 后卫 Defence / 守门员 Goalie
握杆手 Player Shoots	*左手 Left / 右手握杆 Right
守门员 Goalie	*左手 Left / 右手接球 Right Hand Catch

*请圈出对应选项 Please circle the appropriate option(s).

III. 紧急联络人 Emergency Contact

姓名(英)Name(English): _____ (中文 Chinese): _____

与学生关系 Relationship: _____ 联系电话 Contact No.: _____

手机号码 Mobile Phone No.: _____

所有资料绝对保密。All information collected will be strictly confidential.

免责声明 Disclaimer - (如参加者不足 18 岁, 须由家长或监护人代签署 Below to be signed by the parents or guardian on behalf of child/youth under the age of 18)

本人同意参加上述活动, 且愿意遵守 CTC 西姆科规定的课程或活动及规则。在此声明本人健康且体能良好, 适宜参加上述活动。如因本人疏忽、健康或体能欠佳, 引致参加这项活动、使用场地、器材或设施而伤亡或财物损失, CTC 西姆科无须负责。本人同意并授权 CTC 西姆科集团在无需本人审查的情况下, 可使用本人肖像、声音及个人资料作活动及推广之用。

I hereby declare that I am healthy, physically fit and suitable to participate in the activity and agree to abide by all rules and regulations set by CTC. CTC shall not be liable for any injury, death, loss or damage I may suffer in this activity, use of venue, equipment and facilities due to my negligence or inadequacy in health and fitness. I agree to authorize CTC to use my portrait, voice and personal information as the purpose of promotion without further examination.

家长/监护人签字 Parent/ Guardian signature: _____ 日期 Date: _____

审批专用 For Office Use Only -
 付款日期 Payment Date: _____ 确认者 Confirmed by: _____

PRESENTED BY / 主办单位

