



國際康體專業學院

International Health and Fitness Institute

Your right choice to the international recognized courses

課程申請表

Applicant Enrollment Form

PHOTO

Course Title 課程名稱	
Course Code 課程編號	

Participant information 學員資料		
<input type="checkbox"/> Dr. 博士或醫生 <input type="checkbox"/> Mr. 先生 <input type="checkbox"/> Ms. 小姐 <input type="checkbox"/> Mrs. 女士		
英文姓名 Name in English:		中文姓名 Name in Chinese:
出生日期 Date of Birth: DD 日 ____ MM 月 ____ YY 年 ____	身分證號碼: HKID No:	年齡 Age:
通訊地址(請用英文填寫) Address in English :		
住宅電話 Home Phone:	手提電話/傳呼機 Mobile Phone/Pager:	公司電話 Business Phone:
傳真 Fax:	電子郵箱 E-mail:	學歷 Education:
公司名稱 Company Name:	職業 Occupation:	職位 Position:
HOW DID YOU LEARN OF AFPA? 閣下如何得知此課程?		
<input type="checkbox"/> 朋友或同事 Friends or Co-workers _____ <input type="checkbox"/> 課程單張 Course Pamphlets _____	<input type="checkbox"/> 本會畢業生 IHFC/AFPA Graduates _____ <input type="checkbox"/> 健身中心 Fitness Club _____	<input type="checkbox"/> 報章雜誌 Newspaper/Magazines _____ <input type="checkbox"/> 其他 Other _____
<input type="checkbox"/> 網頁 Web Site _____		
Current certificates and work experiences related to health and fitness area: 持有任何有關健康及體適能之證書或工作經驗		

Documents required for processing of applications: Photocopies of valid CPR certificate, HKID card and previous fitness certifications (if any). Also required are 2 non-returnable passport size photographs and duly completed IHFI Applicant Enrollment Form. 需附上下列件之影印本 (身份証、有效心肺復甦法證書、相關體適能證書及近照兩張)

Form of payment: 付款辦法:

All Checks should be crossed and made payable to "International Health and Fitness Institute".

劃線支票抬頭請寫 "國際康體專業學院"

All relevant documents should be mailed to: 請寄有關表格及資料至下列地址:

International Health and Fitness Institute

RM 01-02, 17/F, Mong Kok Commercial Centre, 16 Argyle Street, Mong Kok, Kowloon, Hong Kong

Phone: (852) 2187-3038 Fax: (852) 2187-3020 E-mail: info@ihfi.org Web Site: www.ihfi.org

Notes 注意事項

- | | |
|--|--------------------------------|
| 1. Presenters, dates and times are subject to change without prior notification. | 1. 本會擁有最後權力作上課時間及地點之更改而無須事前通知。 |
| 2. IHFI reserves the right to postpone certification seminars/courses with less than 20 registered participants. | 2. 如因參加人數少於 20 人, 本會有權延期開課。 |
| 3. Personal data provided as part of an application for admission will be handled by IHFI staff only. | 3. 報名表內之個人資料祇作入學申請用途, 由本會職員處理。 |
| 4. Course fees are not refundable, except in the event of a course being oversubscribed or cancelled. | 4. 除課程已滿額或取消外, 一切已繳學費, 概不退還。 |
| 5. An administrative charge of HK\$100 will be levied on all returned checks | 5. 所有銀行退票均需繳付港幣 100 元之手續費。 |

Signature Required 簽署:

Date 日期:

I declare that all information given in this application form and attached documents are, to the best of my knowledge, accurate and complete
本人聲明本申請表及隨附文件所載一切資料, 依本人所知均屬真實, 並無遺漏。

香港 Hong Kong

中國 China

台灣 Taiwan

澳門 Macau

國際康體專業學院 香港總校:

香港九龍旺角亞皆老街 16 號旺角商業大廈 17 樓 02 室

電話: (852)-2187-3038 傳真: (852)-2187-3020 電郵: info@ihfi.org

同意聲明:

- * 如欲報讀課程，須填妥有關報名表格，資料不齊者，恕不接受申請。
- * 本會所頒發之證書有效期為兩年，畢業學員如欲延續證書之有效期，必須於屆滿期前提出申請及修滿本會認可課程之延續學分，所有有關詳請，將於畢業後公佈。
- * 參加者須於上課時出示有效收據並保留至課程完結為止。
- * 如因天氣影響課程進行，除特別聲明外，一般情況下、本會將作以下安排：

- 颱風來時、若氣象局於課程開始前12小時發佈陸上颱風警報，或豪大雨特報並宣佈停止上班上課：所有課程順延。更改後的上課日期將另行通知。
- 若課程前一天，颱風警報，或豪大雨特報已解除及場地許可：課程照常舉行

參加者應考慮實際天氣及交通情況來判斷是否參加活動。如有疑問，請向本會辦處查詢

請細閱以下聲明，並以簽署作為證明閣下已清楚及同意所有細則：

本人_____謹此聲明擁有良好健康狀況及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)，而國際康體專業學院的負責人、理事、員工及有關工作人員均無需付上任何法律或金錢責任。本人更同意國際康體專業學院可保留更改課程活動之日期、時間、內容錄影、錄音、拍攝等的權利，並聲明在課程進行時本人不得擅自作錄影、錄音或拍攝之行為。

本人謹此同意以上聲明，及會遵守國際康體專業學院的學生須知和報名程序。

簽名(Signature): _____ 日期(Date): _____

Consent Statement:

- * Applicants must provide all of the information requested in the application documents, where applicable, otherwise the academy may be unable to process and consider their applications.
- * All Certifications are valid for 2 years. Graduates must renew their qualifications before the certification expiry date. Further details will be announced after graduation.
- * All students must bring along their course fee receipts till the course ends.
- * Unless there is any notice, our course will be arranged as follows under bad weather:

- Typhoon No.8 or above Black rain warning - All courses are cancelled
- If typhoon No.8 or above or black rain warning is lowered 2 hours before the course starts - Courses remain unchanged

All students, for their own safety, should consider the weather and traffic conditions before attending any course. Please call us for any enquiries.

PLEASE FILL IN AND SIGN THE FOLLOWING TO COMPLETE YOUR REGISTRATION:

(Your name here): _____ understand the risks involved with participating in this strenuous event and attest that I am in sound physical condition.

I agree that International Health and Fitness Institute (IHFI), all sponsors and the entire event staff are not responsible for any illness, muscle strains, tears, pulls, broken bone, death, loss and economic consequences that arising as a result of the participation in the event held by International Health and Fitness Institute (IHFI).

I also understand that I may be videotaped, audio - taped and photographed during the events and International Health and Fitness Institute (IHFI) may use my images for any and all uses without my consent. I also agree I have no right to videotape, audio-tape or photograph any part or at any period of the course. I further agree to all conditions of registration, including but not limited to, the not refund policy.

Signature: _____ Date: _____