珠海學院申請使用體育設施 (團體)

Application for Use of Sports Facilities managed by Chu Hai College of Higher Education (Organization)

由辦事處填寫 For Official Use							
組別	收表日期	編號					
Cat.	Date of Rece	NO.					

			110.	Date of Receipt		Cat.		
(1)	申請人姓名:			1				
` /	Name of Applicant:							
(2)	所代表機構/團體的名稱:							
	Name of Organization Represented:							
(3)	機構/團體的郵遞地址:							
	Postal Address of Organization:							
(4)	電話號碼:							
	Phone Number:							
(5)	擬使用的設施 (請註明數量):	mban na aninad).						
	Facilities Required: (Please specify the nu	mber required):						
	羽毛球場	乒乓球		其他:				
	Badminton Court	Table Tenni	S	Others: _		_		
	籃球/半場	排球						
	Basketball/ Half Court	Volleyball						
(6)	用途:							
(0)	Purpose of Use:							
(7)	使用日期 (請列明):							
()	Date(s) of Use (Please specify):							
(8)	使用時間 (請列明):							
	Time of Use (Please specify):							
(9)	預期參加人數:							
	Estimated Number of Participants:							
(10)	會否向參加者收取費用?		會/不會	<u>合</u> * =				
	Will you collect fees/charges from the par	ticipants?	* Yes/ N			_		
	如會,收費多少?		每位			兀		
(11)	If yes, how much?		\$	<u>~</u> ↓	_ Pe	er person		
(11)	活動會否帶來其他收入?	antivity?	會/不管 * Yes/ N					
	Will any other income be derived from the 如會, (i) 收入多少?	元 acuvity?		o 原(請列明)				
	If yes, (i) how much? \$	/L		ce (please spec	ifv):			
(12)				·不會*				
()	Will you hire the Public Address System?	(If applicable)		s/ No				
(13)		, ,						
` /	(請提供兩名負責人的姓名,其中一名負責人必須在已預訂的時段到有關場地取場。)							
	Name of responsible persons of the event:							
	(Please provide the names of two responsible persons, one of whom must be present at the							
	booked session to take up the booking at the venue.)							
	先生/女士*	職位:						
	*Mr/Miss/Ms/Mrs		Held:					
	電話號碼:							
	Phone Number:							
(14)	申請人簽署:		日期	:				
	Signature of Applicant:		Dat	e:				

^{*}申請人必須提供活動計劃書 Applicant must provide a project proposal