

# 保良局賽馬會北潭涌度假營申請表

## PO LEUNG KUK JOCKEY CLUB PAK TAM CHUNG HOLIDAY CAMP APPLICATION FORM

FOR OFFICIAL USE ONLY

App. No.: \_\_\_\_\_

Received: \_\_\_\_\_

請將填妥之表格傳真至2882 3391或電郵  
至booking@poleungkuk.org.hk  
Please fax completed form to 28823391  
or email to booking@poleungkuk.org.hk

\*團體/家庭名稱  
Name of Organization/Family

中文 Chinese \_\_\_\_\_

英文 English \_\_\_\_\_

\*聯絡人姓名  
\*Contact Person

先生/女士/小姐 Mr. / Ms. / Miss \_\_\_\_\_

\*香港身份證號碼  
\*HKID Card No. \_\_\_\_\_

聯絡電話  
Contact Tel. No. \_\_\_\_\_

\*手提電話  
\*Mobile No. \_\_\_\_\_

傳真  
Fax No. \_\_\_\_\_

電郵  
E-mail \_\_\_\_\_

\*通訊處  
\*Address \_\_\_\_\_

接收確認信方式(信件/傳真/電郵) Method of receiving confirmation letter (Letter / Fax / E-mail)

申請營期 由 \_\_\_\_\_ 至 \_\_\_\_\_ 或 由 \_\_\_\_\_ 至 \_\_\_\_\_  
Camping Period: From \_\_\_\_\_ to \_\_\_\_\_ or From \_\_\_\_\_ to \_\_\_\_\_

# 房間可容納人數將按政府規例而不時更改。請先參閱收費表

# Room capacity will be changed in accordance with Gov't rules from time to time, please refer to camp fees schedules first.

*必須填寫 (*Required)		可租營額 Capacity of Unit	用營時間 Period	男 Male	女 Female	總數 Total	擬租用營舍數目 No. of Hostel
特選團體營 (10人) # Selected Group Hostel (10 persons) #		28間 28 units	下午3時15分 (入營)  離營日中午12時30分 或之前交還房間鎖匙 並下午1時45分離營  3:15 p.m. (Check-in)  Return hostel room key by 12:30 p.m. and depart at 1:45 p.m. on check-out day				
特選家庭營 Selected Family Hostel	一廳兩房(4人) 2-bed room (4 persons)	6間 6 units					
	一廳兩房(6人) 2-bed room (6 persons)	6間 6 units					
	一廳三房(8人) 3-bed room (8 persons)	6間 6 units					
賽馬會大樓 Jockey Club Block	一廳兩房(4人) 2-bed room (4 persons)	3間 3 units					
	雙層床(10人) # Bulk Bed (10 persons) #	4間 4 units					
日營 Day Camp			上午9時至下午4時 9:00 a.m. - 4:00 p.m.				
下午營 Happy Hour Camp			下午2時至下午9時 2:00 p.m. - 9:00 p.m.				

備注:

此表格上之個人資料除作上述用途外, 本局將不時透過直接郵遞、電郵、電話、手機短訊及傳真等途徑, 向閣下提供有關本局動向、服務推廣及籌募活動等的資訊, 屆時將需要使用閣下存於本局之聯絡資料與閣下通訊。如不擬收取, 請與保良局營務組聯絡或在以下方格內加「✓」號後交回本局, 電話: 2277 8678 或傳真: 2882 3391。

[ ] 本人不欲收取任何如上所述的保良局宣傳郵件。

Your personal data provided in this form will be used for the above purpose. The Kuk may use your personal data in the database of the Kuk to send you the most updated information relating to our services and development through various channels such as direct mailing, email, telephone, SMS or facsimile, etc. If you do not wish to receive such materials, please contact Recreational Services Department or put a 「✓」 in the box below and send back to Po Leung Kuk through Tel: 2277 8678 or Fax: 2882 3391

[ ] I do not wish to receive the promotion materials from Po Leung Kuk as specified above.

聲明:

本團體同人/家庭成員自當遵守規營簡則。用營期內倘有違反營規或發生任何意外, 概由本人等自行負責。謹以本人/

本人簽名及團體確認信證明本團體家庭之申請

We will comply with all regulations and conditions set out for the use of the camp, and will take full responsibility in the event of any violation of the regulations and conditions and any accidents howsoever caused. I certify that I have the authority to bind our group by signing this application with organization chop if applicable.

負責人姓名  
Representative \_\_\_\_\_

先生/女士/小姐 Mr. / Ms. / Miss \_\_\_\_\_

職位  
Position \_\_\_\_\_

\*團體印鑑及負責人簽署  
\*Organization's Chop & Signature \_\_\_\_\_

日期  
Date \_\_\_\_\_

請將填妥之表格寄交香港禮頓道66號保良局康樂服務部。

Please send this completed form to Recreational Services Department, Po Leung Kuk, 66 Leighton Road, Hong Kong.