



HONG KONG WUSHU UNION
香港武術聯會

Application Form for Instructor/Master Referral
教練轉介申請表

Name (in English) _____ Name (in Chinese)
姓名 (英文) _____ 姓名 (中文) _____

Sex _____ Date of Birth _____ Nationality _____
性別 _____ 出生日期 _____ 籍貫 _____

I. D. Card No. or Passport No.
身份證或護照號碼 _____

Education _____ Occupation _____
學歷 _____ 職業 _____

Address地址

Tel. No. _____ Pager/Mobile Phone No.
電話 _____ 傳呼機/手提電話號碼 _____

What kind of wushu do you want to learn ?
要求習武項目

Which kind of languages can you speak ?
懂何種方言

Have you learnt wushu before ?
Please specify (If yes, please write down styles and no. of years)
是否曾習武 ? (請詳列項目、年資)

How much can you afford to pay per hour ?

願支付每小時費用

How long do you plan to learn ?

預計習武時間

Objectives of learning wushu : -

習武目的

Any others ?

其他資料

Signature of Applicant (申請人簽署)

Date (日期)

FOR OFFICIAL USE ONLY(辦事處專用)

Is the referral successful ?

Yes

No

轉介是否成功 ?

是

否

Monthly Fee

Referral Date

每月學費 : _____

轉介日期 : _____

Received By

Contract Signed Date

經手人 : _____

合約簽署日期 : _____

你所提供的資料只用於本會的康體活動報名及活動宣傳之用。日後，如欲更改或查詢你申報的個人資料，可與本會職員聯絡。申請人如未能提供所需的個人資料，本會可能無法處理有關申請。The information provided by the applicant will be used for the application for registration of Hong Kong WuShu Union for future contact purpose only. If applicant wishes to amend or retrieve the personal information provided, please contact the staff of the HKWU who has accepted the application. If applicant fails to provide the required personal information, we may not be able to process the application.