



Sports Association for the Physically Disabled of Hong Kong, China

地址：新界沙田美林邨美楓樓 B 座地下 141-148 室

Address: Unit 141-148, G/F, Block B, Mei Fung House, Mei Lam Estate, Shatin, N.T.

電話 Tel.: 2602-8232 傳真 Fax: 2603-0106

電郵 Email: admin@hksapd.org

網頁 Website: www.hksapd.org

April 2026 to September 2026 Training Course Enrollment Form

Training Course Details: Please refer to the Association's website (<https://www.hksapd.org/trainingcourse.html>)

Entry Fee: Free (Participant must be a member of the Association)

Enrollment Procedure: Participants should read the Appendix of *Notes for Enrollment* and *Notes to Participants*, then complete and submit the Enrollment Form to the Association by mail, email, fax, or in person on or before the deadline.

Address: Unit 141-148, G/F., Block B, Mei Fung House, Mei Lam Estate, Shatin, New Territories, Hong Kong

Email: enrollment@hksapd.org Fax: 2603 0106

Deadline: 6 March 2026 (Friday)

Enquiries: 2602 7918

Please add "✓" in the appropriate

Enrollment for Local Training Courses (Maximum of **three choices**, please fill in the boxes in accordance to your priority.)

Order of Priority	1 st Choice	2 nd Choice	3 rd Choice
Course No.			

Participant's Information

Name: _____ (Chinese) _____ (English)

Gender: Male Female Date of Birth: _____ (DD/MM/YYYY) Age: _____

Address: _____

Tel. No.: _____ (Home) _____ (Mobile)

Email Address: _____

Current School / _____

Occupation: _____ Membership No.: _____

Impairment

Visual impairment Total blindness Low vision

Physical impairment Cerebral palsy Hypertonia Muscular dystrophy Limb deficiency Impaired range of movement

Brain Injury Limbs incoordination Spinal cord injury Short stature

Leg length difference Others (Please specify)

Affected Body Part(s): Eye Right arm Right Leg Trunk Left arm Left leg

Others (Please specify)

Please turn over



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Aids: Stick/ crutch Electric Wheelchair (Capable to transfer seat Not capable to transfer seat)
 Manual Wheelchair Others (Please specify)

Dominant Hand: Right Hand Left Hand

Please turn over



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Emergency Contact Person

Name: _____ Contact No.: _____ Relationship: _____

Physical Fitness and Health Conditions

Regular physical activity is fun and healthy, and increasingly more people are starting to become more active every day. However, participants should check with their doctor before participating in related activities. Please read the questions carefully and answer each one honestly.

1. Has your doctor ever said that you have a heart condition and that you should only do physical activity recommended by a doctor? Yes No
2. Do you feel pain in your chest when you do physical activity? Yes No
3. In the past month, have you had chest pain when you were not doing physical activity? Yes No
4. Do you lose your balance because of dizziness or do you ever lose consciousness? Yes No
5. Is your doctor currently prescribing drugs (for example, water pills) for your blood pressure or heart condition? Yes No
6. Do you know of any other reason why you should NOT do physical activity? Yes No

If you answered YES to one or more questions, consult with your doctor and confirm if you are suitable to participate in the Training Courses BEFORE you join.

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Declaration

I, _____ (Name of the participant), hereby understand and agree that:

1. All information provided is genuine and correct, without any fraud on submission of personal data, or false submission of personal data of others. I will be disqualified if the information provided is inaccurate, incorrect or omitted;
2. I am healthy and physically fit to participate in the Training Courses and Sports Association for the Physically Disabled of Hong Kong, China (Association) will not be held liable for any medical condition of me;
3. My provision of personal data on this Enrollment Form is on a voluntary basis, the Association may not be able to process my enrollment if I do not provide sufficient personal data. I understand that personal data provided will be used for the following purposes:
 - Handling enrollment and contact relating to the Training Courses;
 - Collecting opinion, conducting statistical reviews and surveys;
 - Transferring the related information to authorized person or organizations, such as transportation service provider, for the aforesaid purposes.The Association will process and hold the collected personal data in a secure manner. If participants request to access, correct his/her personal data or cease the use, please contact the Association staff.
4. Photos and videos taken at the Training Courses may be used by the Association for related marketing or promotional purpose;
5. The Association reserves the right to limit and refuse any enrollment, and participants are to abide by the Association's decision on all matters relating to the Training Courses, which shall be final. This includes the right to interpret, amend, cancel or suspend contents of the Training Courses or the above terms and conditions without prior notice; and
6. I take full responsibility for death or any injury or for any damage to or loss or destruction of property that may arise from my participation in the Training Courses. I will not seek to penalize, prosecute or claim compensation from the Association for any injury, loss or damage.

Signature of Participant: _____ Date: _____

Parent /Guardian is required to complete this part for participant aged below 18

I have read the above declaration and agree _____ (Name of the participant) to participate in the Training Courses.

Name of Parent/Guardian: _____ Signature of Parent/Guardian: _____

Relationship: _____



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Appendix - Notes for Enrollment and Notes to Participants

Notes for Enrollment:

1. Participants must be members of the Association and be of age 8 or above. Participants of youth Training Courses must be aged 8 to 21. Participants' age is calculated against the commencement date of the enrolled course.
2. Participants could choose a maximum of three Training Courses. The Association will arrange where reasonably possible.
3. When there is oversubscription, selection will be made by drawing lots.
4. Enrollment will not be processed if the participants fail to provide necessary information.

Notes to Participants:

1. In the first two sessions, the coaches will assess the participants if they are suitable to attend the Training Courses. Participants must pass the assessment before they can continue the Training Courses.
2. Participants should be aware of their health condition and should not attend the session when feeling unwell. For safety's sake, coaches are entitled to stop any participant from taking part in the Training Courses, if in their opinion, that participant's health condition is unsuitable for participation.
3. Participants who are unable to attend the session should inform the Association staff with supporting documents as early as possible; the Association reserves the right to terminate the participation of any participant who is absent from the Training Courses without a valid reason or unable to attain 80% attendance.
4. Participants who wish to withdraw from the Training Courses should inform Association staff 10 working days in advance.
5. The coaches and Association staff are entitled to terminate participation of anyone who misbehaved in the Training Courses.
6. Schedule of Training Courses is subject to change without prior notice, please visit the Association's website for up-to-date information.
7. In case of inclement weather, please refer to Bad Weather Arrangement (<https://www.hksapd.org/badweather.html>).