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| **申請發還康樂體育活動費用**  **Application for Refund of Recreation and Sports Programme Fee** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | For Office Use 收件日期  Received Date：  Folio No.: \_\_\_\_\_\_\_\_\_\_\_A(ii)1/2 | | |
| I. | | 此欄由申請人填寫 (填妥下表後，請交回主辦活動分區辦事處)  To be completed by the applicant and returned to the office organising the activity. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | **參加者資料(Personal Particulars)：請用正楷填寫 (In Block Letters)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | 姓名\* | ： | (中) | | | | | | | | | | | |  | | | | 身分證明文件號碼 (首四個號碼)\*  Identity Document No.(First 4 digits) | | | | | | | | | | | ： | | | |  | |
|  | | Name\* | ： | (英) | | | | | | | | | | | |  | | | | 聯絡電話  Contact Tel. No. | | | | | | | | | | | ： | | | |  | |
|  | | 通訊地址  Correspondence Address | | | | | ： | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | **活動資料(Activity Details)：** | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
|  | | 活動名稱Programme Name | | | ： |  | | | | | | | | | | | | |  | | 活動編號Programme No. | | | | | | | | ： |  | | | | | | |
|  | | **報名時繳款方法(Payment Method)：** 請在適當方格內加上“🗸”號 (please mark“🗸”in appropriate square) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | □ 現金/支票 (Cash/Cheque) | | | | | | | □ 繳費靈 (PPS) | | | | | □ 轉數快(FPS)\* | | | | | | | | | | | | | □康體通自助服務站/智能自助服務站 (Leisure Link Kiosk /Smart Self-service Station\*) | | | | | | | | | |
|  | | □ 信用卡 (Credit Card) | | | | | | 請注意，如以信用卡繳付費用，退款只存入原先用以繳款的信用卡帳戶。  Please note that refund for fees paid by credit card can only be made to the credit card account originally used for payment. | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | **\***只適用於SmartPLAY系統付款的活動費用 (Only applicable to enrolment fee paid in SmartPLAY)  **申請退款的理由(Reason for Application of Refund)：** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
|  | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | |
|  | | 退款金額  Total Amount of Refund： | | | | | | | | $ | | | | | | | |  | | | | |  | | | | | | | | | | | | | |
|  | |  | | | | |  | | | | | | | |  | |  | | | | | | | | | | | | | | | | | | | |
|  | | 請在適當方格內加上“”號 (please mark“”in appropriate square) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | □ 本人附上上述活動的許可證正本。 ( 許可證編號: ) | | | | | | | | | | | | | | | | | | | | | | | | | | □ 本人附上醫療報告。 | | | | | | | | |
|  | | I attach the original permit of the above activity. (Permit No.: | | | | | | | | | | | | | | | | | | | | | | | | | | ) I attach the copy of medical certificate. | | | | | | | | |
|  | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | □ 本人遺失上述活動的許可證，如果尋回該許可證，本人定會交還康樂及文化事務署。 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | I declare that the permit of the above activity was lost. If the permit is found, I will return it to the Leisure and  Cultural Services Department. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | \*須與報名時提供的身份證明文件相符  As shown on the identity document produced at the time of enrolment | | | | | | | | | | | | | | | | | | | | | | | 申請人簽署  Signature of Applicant： | | | | | | | | |  | | | |
|  | 日期  Date： | | | | | | | | |  | | | |
|  |  |  | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | |  | | | |
| II. | | 如申請人在18歲以下，須由家長/監護人填寫此欄（家長/監護人須為18歲或以上之人士），並帶同申請人出生證明文件正本/副本(只供查閱)及家長/監護人的身分證明文件正本/副本(只供查閱)，代收退款。 If the applicant aged below 18, this section should be completed by his/her Parent or Guardian (Parent/Guardian should be aged 18 or above). Please bring along both applicant’s and applicant’s parent/guardian’s identity document(s) (original or copy) for verification. Refund will be payable to his/her Parent or Guardian. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 家長/監護人簽署  Signature of Parent/Guardian： | | | | | | | | | | |  | | | | | | | | | |  | 家長/監護人姓名(正楷)：  Name of Parent/Guardian  (Block Letters)： | | | | | | | | | | (中)  (英) | | | | |
|  | |  | | | | | | | | |  | | | | | | | | | |  |  | | | | | | | | | |  | | | | |
| 家長/監護人身分證明文件號碼(首四個號碼)  Parent/Guardian’s Identity Document No.(First 4 digits)： | | | | | | | | | | | | |  | | | | | | | |  | | | | 日期  Date： | | | | | | |  | | | | |
|  | |  | | | | | | | | | |  | | | | | | | | |  |  | | | | | | | | | | |  | | | |
| 備註：你提供的資料只作處理退款時作核實身分之用。有關你的個人資料，除獲本署授權職員外，將不會提供予其他人士。若要求更改或索取你申報的個人資料，可與本辦事處的職員聯絡。 Remarks: Information provided by you will be used only for verification of identity when arranging refund. Apart from staff duly authorised by the Department, no one will be given access to your personal information. If you want to revise or retrieve the personal information you have provided, you may contact the counter staff of this office. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

III. 接獲申請通知(收到申請後發給申請人)

# For Office Use

收件日期

Received Date：

Folio No.: \_\_\_\_\_\_\_\_\_\_\_A(ii)1/2

Acknowledgement (To be given to the applicant on the receipt of this application)

致: 先生/女士

To: Mr/Ms/Miss

本辦事處已收到你就\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(活動名稱及活動編號)要求發還 元的申請及該活動的許可證(編號: )。

I acknowledge the receipt of your application for refund of $\_\_\_\_\_\_\_\_\_\_\_\_ for (Programme Name and Programme No.)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and the permit of the activity (No.: ).

職員姓名及職位

Name and post of Officer：

日期

Date：