

To: School Sports Programme Unit
 Leisure and Cultural Services Department
 (Fax: 2684 9076)

(For Official Use Only)
Date of Receipt: _____
S/N No.: _____

School Sports Programme
The iSmart Fitness Scheme for the 2023/24 Academic Year
Application Form
 (Please return the form to the School Sports Programme Unit
 by fax on or before 9 June 2023)

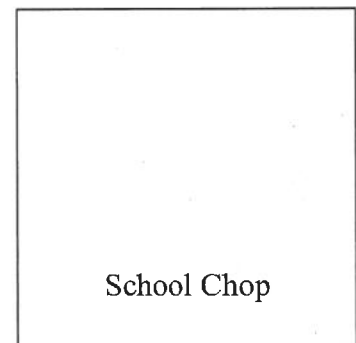
A. Our school wishes to join the iSmart Fitness Scheme (Scheme).

Name of
 Teacher-in-charge: _____ Post: _____
 Tel. No.: _____ Email: _____

B. Our school * willing / unwilling to lend the school 's facilities (for example: hall or playgrounds) to organise "Parents and Students' Seminar" activities.

* *Please delete as appropriate*

Signature of
 Principal : _____
 Name of Principal : _____
 Name of School : _____
 School Address : _____
 Fax No. : _____
 Date : _____



Remarks:

- i. The information provided by the applicant will only be used by the LCSD for the purposes of handling applications for the Scheme, announcing balloting results, compiling statistics, maintaining future contact and conducting feedback surveys. Only persons authorised by the LCSD will have access to such personal information. For correction or enquiries of the personal information submitted, please contact the staff of the School Sports Programme Unit on 2601 7602.
- ii. Preferences of schools are for reference only. The LCSD reserves the right of final decision.

<p>Acknowledgment Receipt</p> <p>We will affix the chop on your application form and follow up on the application. The teachers-in-charge should check and retain the receipt. If you have not heard from us on the day of application submission, please contact Mr Eric FUNG on 2601 7611.</p>	<p>The LCSD's chop affixed here to acknowledge receipt</p> <p>Date of Reply: _____</p>
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