

JOCKEY CLUB STUDENT DRAWING COMPETITION ENTRY FORM

賽馬會學童繪畫比賽參加表格

致：九龍大角咀福全街六十三號大角咀市政大廈六樓「二零一八年香港花卉展覽相應活動小組主席」
To: Chairman of Fringe Activities Sub-committee, 6/F., Tai Kok Tsui Municipal Services Building,
63 Fuk Tsun Street, Tai Kok Tsui, Kowloon

查詢電話 Enquiry Tel.: 2606 3893 2393 1261
11/2017 - 03/2018 03/2018 以後 onwards

傳真號碼 Fax No.: 2396 5520

存檔編號 File Ref (由部門填寫 For Office's use only)

學校名稱 Name of School

中文 Chinese _____

英文 English _____

地址 Address _____

電話 Tel. No. _____

傳真 Fax No. _____

負責教師 Teacher in Charge

1. _____

2. _____

組別 Section (請在適當處加 "✓" 號。 Please put a "✓" where appropriate.)

小學組 Primary School Section

A 小一至小三 Primary One to Primary Three

B 小四至小六 Primary Four to Primary Six

中學組 Secondary School Section

C 中一至中三 Form One to Form Three

D 中四至中六 Form Four to Form Six

編號 學生姓名 Name of Student

No.	中文 Chinese	英文 English	組別 Section 請於適當處加 "✓" 號。 Please put a "✓" where appropriate.			
			A	B	C	D
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						

學校蓋章 School Chop

校長姓名 / 簽署 Name/Signature of Principal

日期 Date

註：請將填妥的參加表格連同回郵信封寄回上述地址。 Note: Please mail the duly completed entry form together with a stamped self-addressed envelope to the address as stated above.

負責教師姓名 Teacher in charge _____

地址 Address _____

回

負責教師姓名 Teacher in charge _____

郵

地址 Address _____

地

址

附註：參賽者所提供的個人資料及其他資料，只作報名、統計、聯絡及宣傳用途。

參賽者如要更改或查閱所申報的個人資料及其他資料，請與二零一八年香港花卉展覽相應活動小組聯絡（電話：2606 3893 / 2393 1261）

Note: The personal data and information provided by entrants will be used for the purposes of enrollment, statistical use, correspondence and publicity only.

If any entrant wishes to amend or retrieve the personal data and information submitted, please contact the Fringe Activities Sub-committee, Hong Kong Flower Show 2018 on 2606 3893 / 2393 1261.