

Badminton Coaching Sessions



Badminton Interest Group (BmIG) has organized practice sessions where a coach will be there to give individual players advice on how to improve his/her basic badminton techniques, including serves, footwork, shots and gripping technique while you are practising.

Details are listed below:

Session	Targeted participants	Dates and Time	Venue				
One		10 October (Friday) 8:00 pm – 10:00 pm					
Two	Members who wish to learn and improve basic badminton techniques	17 October (Friday) 8:00 pm – 10:00 pm	Sun Yat Sen Memorial Park Sports Centre, Hong Kong				
Three	1.00	24 October (Friday) 8:00 pm – 10:00 pm					

Fee: \$100/session

Capacity: Min 10 persons (max 12 persons) / session

(Unless the minimum number of participants is reached, otherwise the session

will be cancelled.)

Instructor: Mr. Dennis Hui

Level 1 Coach of the HK Badminton Association; graduated from Chinese University of Hong Kong with a Master of Science degree in Exercise Science

Remarks: Participants should bring their own rackets, while shuttlecock will be provided.

Registration

To register, please complete the enrolment form and return it with full payment to the Institute on or

before:

Session one (10 Oct): **7 October 2014**Session two (17 Oct): **14 October 2014**Session three (24 Oct): **21 October 2014**

Enrolment is on a first-come first-served basis.

Enrollees will be notified of his/her enrolment status by

email two days after the deadline.

Enquiries

Ms. Jenny Wu

Corporate and Mainland Affairs

Tel: 2287 7034

Email: jennywu@hkicpa.org.hk



Badminton Coaching Sessions

Enrolment Form

Please reply on or before 10 Oct (for Session one), 14 Oct (for Session Two) and 21 Oct (for Session three)

MCS2 Event Code: BmlG141010

Finance & Operations Department, Hong Kong Institute of CPAs

37th Floor, Wu Chung House, 213 Queen's Road East, Hong Kong.

Fax no: 2893 9853

	FOR OFFICE USE							
Seq. no.:								
Handled by:								

Please allow 4 working	days to	proc	ess y	our ap	plica	tion. Yo	ou ca	an	chec	k yo	ur e	nro	olment	status at "My CPA"	at www.h	kicp	a.org	j.hk.
Name:	(Mr./Mrs./Ms.) BmIG member: ☐ Yes ☐ No																	
Membership No.:	Email:																	
Tel:	Mobile:																	
	(for emergency contact on the day of activity)																	
Session:	□ 10 October (Fri) □ 17 October (Fri) □ 24 October (Fri)																	
Fee:	No. of sessions: x HK\$100 =																	
Payment Method (Pl	ease tick	the a	рргорі	riate bo	x)													
☐ Cheque (no) paya	ble t	o "Hon	g Ko	ng	Insti	tute	of C	er	tified F	Public Accountants" of	or "HKICI	PA"		
□ VISA / MasterCard																		
Card Number:								T						Card Expiry Date (I	лм/ ү ү).			
		<u> </u>	<u> </u>		<u> </u>	1				4		<u> </u>		Card Expiry Date (1]		
Cardholder's Name (block letters): Cardholder						ers	s Sigi	natu	re:				Date:	Date:				
☐ I would like to have an official receipt. (Remarks: Official receipt will be sent to your email address provided above.)																		
Declaration I declare that I do not suffer from any illness/disability that renders me unfit to participate in the above activity. I will immediately notify the convenor of the interest group/HKICPA if, for any reason, my health subsequently renders me or may render me unfit to participate in the above activity. I fully accept that the convenor of the interest group/HKICPA will then consider whether I should, in the interest of safety or the safety of the other participants, continue to be allowed to further participate in future sessions and that his/her/the decision of the HKICPA will be final. Where trainers are in place, I agree to follow the trainer's instructions. I agree that this may be a verbal, visual, physical or demonstrative form of communication. I will ask for further clarification of any ambiguous and/or inaudible instructions. I understand that I will be asked to leave a session immediately if deemed to be deliberately ignoring the instructions from the trainer. Assumption of Risks and Disclaimer of Liability As a participant in the above activity you accept that you may be exposing yourself to risk of harm due to the hazards inherent in the activity.																		
Signature: Date:																		
For payment by c	heque,	, ple	ase f	fill-in	your	posta	al ac	dd	Iress	for	ref	uı	nd in	case the event is	full or	can	celle	ed.
Name :	1						Nar	Name:										
Address:	Address:																	

Notes:

- 1. Priority for enrolment will first be offered to BmIG members and then to non-BmIG HKICPA members in the case of over subscription. Non-members' applications will only be processed after registration deadline subject to availability.
- 2. Full payment must be made before your enrolment will be processed. No telephone reservation will be accepted.
- 3. The closing dates for enrolment are 10 Oct (for Session one), 14 Oct (for Session Two) and 21 Oct (for Session three). However, the Institute has the discretion to accept late enrolments as it sees fit.
- Application by fax will ONLY be accepted when payment is made by credit card. Cash is strictly NOT accepted.
- 5. Successful enrollees will receive confirmation by email or by telephone, whereas unsuccessful applicants will receive full refund.
- 6. If you do not hear from us two working days after the closing date, please contact Ms. Jenny Wu at 2287 7034 / Ms. Elaine Wai at 2287 7230.
- Unless the activity is cancelled due to unforeseen circumstances, low enrolment or bad weather, no refund for withdrawal will be entertained after the enrolment has been processed.
- 8. Bad weather arrangement: The activity will be cancelled if typhoon signal no. 8 or above / Black Rainstorm Warning is hoisted 2 hours prior to the commencement of the activity.
- 9. The Institute reserves the right to change the venue and date of the activity due to unforeseen circumstances.

Personal Data: Your personal data collected from the enrolment process and administration of courses/events/activities will be used for the purpose of the administration of the course/event/activity on which you are enrolled ("Event"). Such data collected may be accessible by the Institute's officers, persons or committees processing the application and related matters. In addition, the Institute may use the collected data for statistical research and analysis. By submitting this Enrolment Form, you understand and agree that the Institute may provide your personal data above to co-organisers/service providers in or outside Hong Kong for the purpose relating to the Event. The Institute intends to use the personal data of your name, email address and correspondence address to inform you, where relevant, of members' benefits, goods, services, facilities and events organized or provided by the Institute or other organizations. Members and registered students may opt out of receiving such materials at any time by logging in via the following link https://www.hkicpa.org.hk/en/members-area/comm-preference/. Non-members may opt out of receiving such materials at any time by sending an email to the Institute at privacy-policy/. For more information about the privacy policy of the Institute, please go to https://www.hkicpa.org.hk/en/service-tools/privacy-policy/.

Event Information Enquiry: 2287 7034 / e-mail: jennywu@hkicpa.org.hk

Payment & Enrolment Status Enquiry: 2287 7381 / e-mail: finance@hkicpa.org.hk