

★ **Applicant's Details** 參加者資料

Name 姓名: _____ (English Name) _____

Sex 性別: M男 / F女 Age 年齡: _____ Date of Birth 出生日期: _____ (yyyy/mm/dd)

Address 地址: _____

School Studying 就讀學校: _____

★ **Guardian's Details** 監護人資料

Name 姓名: _____ Home Tel. No. 住宅電話: _____

Mobile no. 手提電話: _____ Emergency Contact no. 緊急聯絡電話: _____

Email Address 電郵地址: _____

★ **Please select lesson week and program (can choose to join different program on different week):**

請選擇上課週及參加課程種類 (可於不同星期上不同種類課程)

JS 2 2-hours on-range training program	JS 3 3-hours on-range training program	JS ELITE 2-hours on-range lessons + on -course
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Week 1 01/7 - 07/7 JS 2 / JS 3 / JS ELITE

Week 5 29/7 - 04/8 JS 2 / JS 3 / JS ELITE

Week 2 08/7 - 14/7 JS 2 / JS 3 / JS ELITE

Week 6 05/8 - 11/8 JS 2 / JS 3 / JS ELITE

Week 3 15/7 - 21/7 JS 2 / JS 3 / JS ELITE

Week 7 12/8 - 18/8 JS 2 / JS 3 / JS ELITE

Week 4 22/7 - 28/7 JS 2 / JS 3 / JS ELITE

Week 8 19/8 - 25/8 JS 2 / JS 3 / JS ELITE

Week 9 26/8 - 01/9 JS 2 / JS 3 / JS ELITE

★ **Please select lesson time**

Age 年齡	4 - 9
	10 - 18

Location 上課地點:	Time / Day 時間 / 星期	Mon 一	Tue 二	Wed 三	Thu 四	Fri 五	Time / Day 時間 / 星期	Sat 六	Sun 日
Olympian City 1 奧海城	9:00-10:00	<input type="radio"/> 4-9	<input type="radio"/> 4-9	<input type="radio"/> 4-9	<input type="radio"/> 4-9	<input type="radio"/> 4-9	9:00-10:00	<input type="radio"/> 4-9	<input type="radio"/> 4-9
JS 2 Please select 2 lessons	10:00-11:00	<input type="radio"/> 4-9	<input type="radio"/> 4-9	<input type="radio"/> 4-9	<input type="radio"/> 4-9	<input type="radio"/> ELITE	10:00-11:00	<input type="radio"/> 4-9	<input type="radio"/> ELITE
	11:00-12:00	<input type="radio"/> 10-18	<input type="radio"/> 10-18	<input type="radio"/> 10-18	<input type="radio"/> 10-18	<input type="radio"/> 10-18	11:30-12:30	<input type="radio"/> ELITE	<input type="radio"/> 4-9
	12:00-13:00						12:30-13:30	<input type="radio"/> 4-9	<input type="radio"/> 4-9
JS 3 Please select 3 lessons	14:00-15:00						13:30-14:30		
	15:00-16:00	<input type="radio"/> 10-18	<input type="radio"/> ELITE	<input type="radio"/> 10-18	<input type="radio"/> ELITE	<input type="radio"/> 10-18	14:30-15:30	<input type="radio"/> 10-18	<input type="radio"/> 4-9
	16:00-17:00	<input type="radio"/> 4-9	<input type="radio"/> 4-9	<input type="radio"/> 4-9	<input type="radio"/> 4-9	<input type="radio"/> 4-9	15:30-16:30	<input type="radio"/> 4-9	<input type="radio"/> 10-18
JS ELITE Please select 2 lessons	17:00-18:00	<input type="radio"/> 4-9	<input type="radio"/> 4-9	<input type="radio"/> 4-9	<input type="radio"/> 4-9	<input type="radio"/> 4-9	16:30-17:30	<input type="radio"/> 4-9	<input type="radio"/> 4-9
	18:00-19:00	<input type="radio"/> ELITE	<input type="radio"/> 10-18	<input type="radio"/> 4-9	<input type="radio"/> 4-9	<input type="radio"/> 10-18	17:30-18:30	<input type="radio"/> 10-18	<input type="radio"/> 10-18
	19:00-20:00	<input type="radio"/> 4-9	<input type="radio"/> 10-18	<input type="radio"/> 4-9	<input type="radio"/> 10-18	<input type="radio"/> 10-18	18:30-19:30	<input type="radio"/> 10-18	<input type="radio"/> 10-18

JS ELITE On-course Training Schedule

*Please refer the Sat & Sun lesson time to the right timetable

<input type="radio"/>	MON	0900 - 1100	<input type="radio"/>	WED	1700 - 1900	<input type="radio"/>	FRI	1700 - 1900
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*Terms & conditions

1. Make-up class would be granted if you have give us advance notice at least 4 hours prior the schedule lesson time.
2. Appointment is a must.
3. AGA reserves every right on any disputes or problem.

Please fill in next page

You can return this form to us: 1) By Fax: (852) 2875-5175; 2) By mail: AGA, 2/F Olympian City 1, 11 Hoi Fai Road, Kln. 3) In person to our Olympian City School. 閣下可將已填妥之表格以: 1) 傳真: (852) 2875-5175 或 2) 郵寄至“九龍大角咀奧海城一期二樓, 澳洲高爾夫球學院收” 或 3) 親身交回至奧海城主校辦事處

★ Please select the time for attending skill test

B

e <input type="checkbox"/>	BT <input type="checkbox"/> 16	16		24/8 <input type="checkbox"/> <input type="checkbox"/>	30/8 <input type="checkbox"/> <input type="checkbox"/>	2 <input type="checkbox"/>	:RPP <input type="checkbox"/> a16
		24/8 <input type="checkbox"/> <input type="checkbox"/>	30/8 <input type="checkbox"/> <input type="checkbox"/>				
1A & 1B	RV <input type="checkbox"/> <input type="checkbox"/>	<input type="radio"/> <input type="checkbox"/>	<input type="radio"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/>	:RPI <input type="checkbox"/> PV <input type="checkbox"/> 1VP1:MR <input type="checkbox"/> 1VP1:3MR <input type="checkbox"/> VRRPV <input type="checkbox"/>
1C	(P3) <input type="checkbox"/> 13 <input type="checkbox"/>	<input type="radio"/> <input type="checkbox"/>	<input type="radio"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/>	16 a <input type="checkbox"/> t <input type="checkbox"/> t <input type="checkbox"/> t:3 <input type="checkbox"/>
2A	(P3) <input type="checkbox"/> 13 <input type="checkbox"/>	<input type="radio"/> <input type="checkbox"/>	<input type="radio"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/>	
2B	(P3) <input type="checkbox"/> 13 <input type="checkbox"/>	<input type="radio"/> <input type="checkbox"/>	<input type="radio"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/>	
2C	(P3) <input type="checkbox"/> 13 <input type="checkbox"/>	<input type="radio"/> <input type="checkbox"/>	<input type="radio"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/>	
3A, 3B, 3C ^P <input type="checkbox"/> 16	(P3) <input type="checkbox"/> 13 <input type="checkbox"/>	<input type="radio"/> <input type="checkbox"/>	<input type="radio"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/>	
3A, 3B, 3C ⁰ <input type="checkbox"/> 6	PPP <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

★ Application for Tournament in August (Tentative Venue: Palm Island Resort)

CU

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WVWPB

5VPP

<input type="checkbox"/>	(P) <input type="checkbox"/> (1)	5V(P) <input type="checkbox"/> (1)
4-14 years old 4-14 <input type="checkbox"/>	<input type="radio"/> 2 <input type="checkbox"/>	<input type="radio"/> 2 <input type="checkbox"/>
15-18 years old 15-18 <input type="checkbox"/>	<input type="radio"/> 2 <input type="checkbox"/>	<input type="radio"/> 2 <input type="checkbox"/>

WVPPWVTPPV
v04:VWPPP

★ Course Fees

- JS2 : 2
- JS3 : 2
- JSELITE : 2
- JSB : 2
- :203:10(4,5):63

Parental consent: I agree that my child will abide by the rules and regulations set out herein. I will not hold the organizer or its employees responsible for any injury or damage to myself, my family members or my property as a result of participation in the program and activities.

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e

Parent's/Guardian's Signature 家長及監護人簽署

Date 日期:

★ Total payment amount

HK\$ _____

For staff remarks only

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
UR <input type="checkbox"/>	<input type="checkbox"/>	1: <input type="checkbox"/>	1: <input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> uP <input type="checkbox"/>	<input type="checkbox"/> t <input type="checkbox"/>	<input type="checkbox"/> a16 <input type="checkbox"/>	<input type="checkbox"/> a16 <input type="checkbox"/>	<input type="checkbox"/> 7 <input type="checkbox"/>
<input type="checkbox"/> 17 <input type="checkbox"/>	<input type="checkbox"/> t <input type="checkbox"/>	<input type="checkbox"/> 7 <input type="checkbox"/>	<input type="checkbox"/> 4 <input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/> 4 <input type="checkbox"/>	<input type="checkbox"/> (E) <input type="checkbox"/>	
		<input type="checkbox"/> (E) <input type="checkbox"/>	<input type="checkbox"/> 180-(E)33 <input type="checkbox"/>	
		<input type="checkbox"/> 180-(E)33 <input type="checkbox"/>		

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