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| http://greenict.hk/wp-content/uploads/2010/11/ECF-logo1-294x300.jpg | https://fbcdn-profile-a.akamaihd.net/hprofile-ak-xfp1/v/t1.0-1/p160x160/994917_578556462181717_353879056_n.png?oh=5e788744dec801ee947adf5b76548ab3&oe=56A14EC4&__gda__=1452761364_67d034da437b663c20087b03203f7912 | 環境及自然保育基金 及 環境運動委員會 贊助  Sponsored by Environment and Conservation Fund and Environmental Campaign Committee | C:\Users\THEi-fds\Downloads\THEi Brand Identity (endorsement lock-up) _ red.jpg | 香港高等教育科技學院 主辦Organized by Technological and Higher Education Institute of Hong Kong |

城市樹木保育及欣賞 中學計劃Urban Tree Conservation and Appreciation Secondary School Programme

**學生報名表格  
Student Application Form**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 姓名 Name: |  |  |  |  | 年級 # Class #: | 🞎 F3  🞎 F5 | 🞎 F4  🞎 F6 |
|  | (中文Chinese) |  | (英文 English) |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 學校名稱 Name of School: |  |  |  |
|  | (中文Chinese) |  | (英文English) |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 電話 Phone: |  |  |  | 電郵 E-mail: |  |
|  | (手提Mobile) |  | (住宅Home) |  |  |

**緊急事故聯絡人Emergency Contact Person:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 姓名Name: |  | 關係Relationship: |  | 電話 Phone: |  |

**報名活動 # Activity applied for #:**

(C) 古樹名木及石牆保育Heritage Trees and Stonewall Trees Conservation

|  |  |  |  |
| --- | --- | --- | --- |
|  | 活動  Activity | 日期 (時間)  Date (Time) | 地點  Venue |
| 🞎 | 講座：古樹名木及石牆樹的保育 Talk: Heritage Trees and Stonewall Trees Conservation | 16/07/16  (9:30 am - 12:30 pm) | THEi九龍塘校舍 THEi Kowloon Tong Campus |
| 🞎 | 考察：古樹名木及石牆樹欣賞 Field Study: Heritage Trees and Stonewall Trees Walks and Appreciation | 23/07/16  (9:30 am - 12:30 pm) | 香港公園及中環  (或 般咸道及佐治五世紀念公園) Hong Kong Park and Central (or Bonham Road and King George V Memorial Park) |

# 請在適當空格填上✓ Please ✓ the appropriate box

請將填妥之報名表，郵寄至九龍塘聯福道30號KT531室環境及設計學院，及在信封面註明「城市樹木保育及欣賞」；**或**電郵至laipoying@vtc.edu.hk；**或**傳真至3959 7331。**截止日期：活動前一星期。**  
Please return the completed application form to Faculty of Design and Environment at Room KT531, 30 Renfrew Road, Kowloon Tong, and mark ‘Urban Tree Conservation and Appreciation’ on the envelope; **OR** send it to laipoying@vtc.edu.hk; **OR­** fax to 3959 7331. **Deadline: 1 week before activities**.

\*\*報名表格亦可於https://www.thei.edu.hk/events/UTCA下載\*\*

\*\*Application forms can be downloaded at https://ww.thei.edu.hk/events/UTCA\*\*

報名表格Application Form 1/2

報名表格Application Form 1/3

**備註 Notes**

若申請人為18歲以下，須填妥**家長/監護人同意書**。   
If applicant is under 18 years old, please complete **Parents/Guardian’s Consent**.

若申請人欲參與考察活動，請填妥**健康狀況聲明**。  
If applicant would like to join the field studies, please complete **Health Declaration Form**.

報名資料只使用於是次有關活動的通訊。主辦方不會將資料披露或售予第三者。  
Data collected is used for communication on this event only. Data collected would not be disclosed nor sold to any third party.

在一般情況下，報名表將於活動完成後6個月銷毀。  
Application form will normally be destroyed 6 months after completion of the activities.

參加者在活動過程中，可能會被主辦單位拍攝照片或錄影。活動照片或錄影或會被上載至互聯網及公開刊登。  
Organizers may take photos and videos during the activities. Photos and videos of the participants maybe uploaded to the internet or published.

大會保留修改活動細則的權利。  
The organizers reserve all rights to modify the arrangements of the activities when it is deemed appropriate.

為了鼓勵學生參與是項計劃的活動，本院將提供不同的獎項，詳情如下：

In order to motivate students to participate the activities, we will offer the following awards:

出席其中一項活動之學生將獲發**參加証明書**。

Student who has participated one of the activities will receive a **participation certificate**.

如學生能夠：(1) 出席最少一個講座及一個考察；(2) 組成2-6人小組；(3) 以口頭報告或壁報設計形式，將城市樹木保育及欣賞之訊息帶回學校；及　(4)　於2016年8 月31日前提交簡報材料或2-3張相關壁報的照片，並經大會審閱後，將獲發**香港樹木保育青年大使獎狀**。

Students will receive awards of **Hong Kong Tree Conservation Youth Ambassador** after the approval of the organizers if they can:　(1) attend at least a talk and a field study, (2) form a group in 2-6 students, (3) give an oral presentation to their schoolmates or design a board about urban tree conservation and appreciation in their school, and (4) hand in the presentation materials or 2-3 photos of the board before 31 August 2016.

查詢： THEi 環境及設計學院 園藝及園境管理（榮譽）文學士 課程（賴小姐）

電話－3959 7285；電郵－laipoying@vtc.edu.hk；傳真－3959 7331

Enquiry: Programme of Bachelor of Arts (Honours) in Horticulture and Landscape Management,   
Faculty of Design and Environment, THEi (Miss LAI)

Phone－3959 7285; E-mail－laipoying@vtc.edu.hk; Fax: 3959 7331

**聲明 Declaration**

本人聲明在此報名表格的資料，依本人所知均屬完整真確。

I declare that all information provided in this application form is to the best of my knowledge, accurate and complete.

本人已細閱報名表格內之備註，並明白相關事項。

I have read the " Notes" in this application form and understood the details.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 簽署 Signature: |  |  | 日期Date: |  |

報名表格Application Form 2/2

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| http://greenict.hk/wp-content/uploads/2010/11/ECF-logo1-294x300.jpg | https://fbcdn-profile-a.akamaihd.net/hprofile-ak-xfp1/v/t1.0-1/p160x160/994917_578556462181717_353879056_n.png?oh=5e788744dec801ee947adf5b76548ab3&oe=56A14EC4&__gda__=1452761364_67d034da437b663c20087b03203f7912 | 環境及自然保育基金 及 環境運動委員會 贊助  Sponsored by Environment and Conservation Fund and Environmental Campaign Committee | C:\Users\THEi-fds\Downloads\THEi Brand Identity (endorsement lock-up) _ red.jpg | 香港高等教育科技學院 主辦Organized by Technological and Higher Education Institute of Hong Kong |

城市樹木保育及欣賞 中學計劃Urban Tree Conservation and Appreciation Secondary School Programme

**家長/監護人同意書 （適用於未滿十八歲之學生）**

**Parents/Guardian’s Consent (For students aged below 18)**

本人同意\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (申請人姓名) 參加 香港高等教育科技學院主辦之「城市樹木保育及欣賞」活動，並聲明他/她的健康及體能良好，適宜參加上述活動。

I agree to allow\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (applicant’s name) to participate in the activities of ‘Urban Tree Conservation and Appreciation’, organized by Technological and Higher Education Institute of Hong Kong (THEi). I declare that he/she is healthy, physically fit, and suitable to participate in the above activity.

|  |  |
| --- | --- |
| 家長/監護人姓名： Parent/Guardian’s Name: |  |
| 與參加者關係： Relationship with Participant: |  |
| 家長/監護人簽署： Parent/Guardian’s Signature: |  |
| 日期： Date: |  |

家長/監護人同意書Parents/Guardian’s Consent 1/1

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| http://greenict.hk/wp-content/uploads/2010/11/ECF-logo1-294x300.jpg | https://fbcdn-profile-a.akamaihd.net/hprofile-ak-xfp1/v/t1.0-1/p160x160/994917_578556462181717_353879056_n.png?oh=5e788744dec801ee947adf5b76548ab3&oe=56A14EC4&__gda__=1452761364_67d034da437b663c20087b03203f7912 | 環境及自然保育基金 及 環境運動委員會 贊助  Sponsored by Environment and Conservation Fund and Environmental Campaign Committee | C:\Users\THEi-fds\Downloads\THEi Brand Identity (endorsement lock-up) _ red.jpg | 香港高等教育科技學院 主辦Organized by Technological and Higher Education Institute of Hong Kong |

城市樹木保育及欣賞 中學計劃Urban Tree Conservation and Appreciation Secondary School Programme

**健康狀況聲明（適用於申請考察之學生）**

**Health Declaration Form (For students who apply for field studies)**

香港高等教育科技學院 環境及設計學院將舉行以下活動，詳情如下：

Faculty of Design and Environment, Technological and Higher Education Institute of Hong Kong is going to organise the following activity with the schedule as follows:

|  |  |
| --- | --- |
| 活動名稱 Name of Activity: | 考察：古樹名木及石牆樹欣賞  Field Study: Heritage Trees and Stonewall Trees Walks and Appreciation |
| 日期及時間 Date & Time : | 23/07/16 (9:30 am - 12:30 pm) |
| 地點 Venue: | 香港公園及中環 (或 般咸道及佐治五世紀念公園)  Hong Kong Park and Central  (or Bonham Road and King George V Memorial Park) |

由於活動在戶外進行，且需要有一定程度之體能要求，所以參加者必須考慮本身之健康狀況，並盡快交回以下聲明。

As it will involve outdoor activities and need to have a certain level of physical requirements, please consider your health condition and return the following declaration form as soon as possible.

**注意事項 Remarks:**

1. 如遇上惡劣天氣，香港高等教育科技學院有權決定活動是否取消活動。如有查詢，請致電39597285環境及設計學院 (賴小姐)。THEi reserves the right to decide whether the activity will be cancelled in case there is an adverse weather condition. For any enquiries, please contact the Faculty of Design and Environment at 3928 2380 (Miss Lai).
2. 若參加者有任何特殊疾病、需服用醫生指定之藥物或遵從任何指示，敬請在活動當日自行帶備，並知會負責導師。If a participant is on medication, please bring his/her own medicine and inform the staff-in-charge.
3. 參加者在活動期間若有任何不適，均須即時通知負責導師。If a participant does not feel well during the activity, please notify the staff-in-charge immediately.
4. 主辦單位已為參加者購買保險(身故及永久傷殘)，參加者亦可自行購買額外保險。The organizer has purchased group accident insurance (death and permanent disablement) for all participants. Participants may purchase a suitable insurance at your own discretion and expenses.
5. 參加者在活動期間須絕對遵照導師指示。如發生意外，高等科技教育學院無須負上任何責任。如參加者年齡未滿18歲，或對本身健康有不肯定之處，請先徵詢家長/監護人及醫生意見或先進行體格檢查。Participants must follow the instructions of THEi staff and trainers. THEi shall not be liable for any injury or death occurred during the activity. Participants who aged below 18 should consult their parent/guardian or doctor if necessary and the parents/guardian/doctor should sign and return a consent form.
6. 參加者須就其個人資料之更改而通知主辦機構。Participants should inform the organizer if there are any changes of personal information.

健康狀況聲明Health Declaration Form 1/2

**參加者健康狀況聲明** *(請以”🗸”表示)*

**Declaration on Participant’s Health Conditions** *(Please indicate with a tick. ✓ )*

□　本人確認自己健康狀況良好，適宜參加上述戶外活動。  
I declare that I am healthy, physically fit and suitable to participate in the above activity.

□ 本人曾經或正在患有以下病症：  
I have been treated, or been told that I had diseases or disturbances shown below:

|  |  |
| --- | --- |
| □ 哮喘　Asthma | □ 痒癎症　Epilepsy |
| □ 抽搐　Convulsion | □ 腎病　Renal problems |
| □ 心臟病　Heart disease | □ 食物敏感　Food allergy |
| □ 糖尿病　Diabetes | □ 肢體弱能　Physically handicapped |
| □ 貧血　Anemia | □ 肝炎　Hepatitis |
| □ 傳染病　Infectious disease | □ 藥物敏感　Medication allergy |
| □ 肝炎　Hepatitis | □ 畏高/畏水　Acrophobia / Hydrophobia |
| □ 其他 Others: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |

□　半年內接受過手術，請註明：Have undergone any operations in the past six months, please specify:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
|  | 參加者姓名 Name of Participant: |  |
|  | 簽署 Signature: |  |
|  | 日期 Date: |  |

Our Ref.: UTCA/15/AF(St)/003 Update: 17/06/16

健康狀況聲明Health Declaration Form 2/2