

**Closing Date:**  
**4 November, 2024**  
**(Mon)**

**The Gymnastics Association of Hong Kong, China**  
**Hong Kong Artistic Gymnastics Open & Novice Championships 2024-2025**

**Individual Application Form**  
**(Team participants do not need to fill in this form)**

Name: \_\_\_\_\_(Eng)\_\_\_\_\_ (Chi)  
 Gender:  M / F  DOB: \_\_\_\_\_ YYYY MM DD Age: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Tel: \_\_\_\_\_ Email : \_\_\_\_\_  
 HKID No.: \_\_\_\_\_XXX (X)

Recent Photo  
  
(Required)

**Remark:**

**Participant has to submit the copy of personal identification document**

**Application Level & Event:**

Men							Women				
Event	FX	PH	SR	VT	PB	HB	Event	VT	UB	BB	FX
Open (Senior)							Open (Senior)				
Open (Junior)							Open (Junior)				
Elementary			---				Elementary				
				☆(1.15m /1.25m)	☆(1.60m /1.95m)	☆(2.40m /2.75m)		☆(1.15m /1.25m)			
Novice		---	---		---	---	Novice		---		

**Level & Event (Please tick  appropriate boxes) ☆Please circle the appropriate height of Apparatus**

\*Name of Coach: \_\_\_\_\_ (Required)

Contact No.: \_\_\_\_\_

\* Signature of Coach: \_\_\_\_\_ (Required)

Entry Fee: \$170 x \_\_\_\_\_ Event + Insurance\$30

Total = \$ \_\_\_\_\_

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**\*Signature from participants aged 18 or above /**  
**#Signature from the parents / guardians of participants aged below 18**

I certify that I am entering this competition at my risk and responsibility. I agreed to abide by the regulations, policies and anti-doping policy of The Gymnastics Association of Hong Kong, China. I for myself, my executors and administrators, do hereby waive and release, any and all rights, claims and causes of action I have or may have against The Gymnastics Association of Hong Kong, China and all sponsors, promoters, supporters and all other contributors from any and all liability arising from illness, injury death, loss and economic consequences I may suffer as a result of my entry in this event from any cause whatsoever, including negligence. I certify that I am physically fit and sufficiently trained to compete for the completion of this event. I grant permission and assign all rights, title and interest to the organizer to utilize my appearance, name voice biodata and likeness in connection with the race in any and all media throughout the world in perpetually and agree to waive any rights of inspection or approval associated.

I have read and understood the declaration and Physical Activity Readiness (Appendix I).

\*Signature of Participants : \_\_\_\_\_

# Signature of Parents/Guardians : \_\_\_\_\_

Name of Parents/Guardians : \_\_\_\_\_

Date : \_\_\_\_\_