

詠春體育會

VING TSUN ATHLETIC ASSOCIATION

教練証書申請表

APPLICATION FORM FOR THE INSTRUCTOR CERTIFICATE

個人資料 PERSONAL INFORMATION

姓名 NAME :		性別 SEX :	年齡 AGE :
出生日期 DATE OF BIRTH :	籍貫 NATIONALITY :	身份證或護照號碼 I.D. CARD / PASSPORT NO. :	
電郵地址 EMAIL :		聯絡電話 CONTACT NO. :	
曾受業於 (*) RECEIVED TRAINING FROM :			
受業師或證人簽名 PROVEN BY. (Printed name & signature) :		受業師長 或 RELATIONSHIP :	
武館名稱 TITLE OF THE SCHOOL :			
武館地址 ADDRESS OF THE SCHOOL :			
館中職位 POSITION IN THE SCHOOL :		教授年期 TEACHING EXPERIENCE :	

* 按: NOTE:

- 一: 如無受業師長或任何有力証人簽名証實, 本會審查委員將保留權利否定或在証書上註明未証實之字樣。
- 二: 此証書有效年期為三年, 如超過証書上之日期敬請盡速重新填報以求補發。
1. We reserve the right to reject the application of the instructorship or to deny the qualification of the applicant unless he can prove his identification by his own instructor or any powerful witness.
 2. The "school certificate" is good for a duration of three years. Renewal of the certificate or any change of personal information must be registered immediately to the association without delay.

由會方填寫

FOR OFFICE USE ONLY

簽名 : _____
(Signature of the Applicant)

經手人簽名
ISSUING OFFICER _____