**ENROLLMENT FORM (課程報名表)**

|  |  |
| --- | --- |
| CHOICE OF COURSE(報讀課程名稱) |  |
| CHOICE OF TIME(報讀課程日期) | **1ST Priority 第一選** | **2nd Priority第二選** | **3rd Priority第三選** |
|  |  |  |

 \*如閣下首選之課程日期未能開班，可選擇次選日期，若選擇不填上此次選欄，則自動順延至下一課程日期。

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| **PLEASE TELL US ABOUT YOURSELF (個人資料)**  |
| Full name in Capital Letters as in ID: **(身分證/護照上之姓名)** | Name in English(英文姓名): (Dr. / Mr. / Ms. / Mrs.) | Name in Chinese(中文姓名): (先生/女士/小姐) |
| Date of Birth: / /(出生日期) dd日 mm月 yy年 | HKID / Passport No:(first 4 digit)(身份證/護照號碼)頭4個字元 | Age:(年齡) |
| Address:(住址) |
| Home Phone:(住宅電話) | Mobile Phone:(手提電話) | Fax No:(傳真號碼) |
| Place of Employment:(公司名稱) | Occupation:(職業) |
| Office Phone:(辦工室電話) | E-mail Address:(電郵地址) |
| HOW DID YOU LEARN OF ATFP?(閣下從那裏得知本會開設的訓練班?)❑ web 互聯網 ❑ newspaper 報章 ❑ leaflet單張、海報 ❑ friends親友❑ magazine書刊 (雜誌名稱：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) ❑ others 其他：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Current certificates and work experiences related to health and fitness area:(閣下現時所持的證書及有關體適能之工作經驗) |

**Signature Required(簽署):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date(日期):\_\_\_\_\_\_\_\_\_\_\_**

**以下由本學院填寫：**

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| --- | --- | --- |
| **Paid by:** | **Cash / Cheque/Card** | **No.** |
| **Receipt No.:** |  | **Amount:** |  |
| **Payment receive on:** |  | **Certificate no.:** |  |
| **Certificate issue on:** |  | **Certificate received :** |  |

**Enrollment Method**