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| |  |  | | --- | --- | | **亞洲臥推舉錦標賽2021 (9月2-5日)**  **Asian Bench press Championship 2021 (2-5th Sept)**  **(截止報名日期: 2021年6月14日 Registration Deadline: 2021-6-14)** | Affix photo here (Photo must be attached or the application will be rejected)  照片貼在上格  (必須提供照片，否則申請將不被接納) | | **REGISTRATION OF COMPETITOR 運動員註冊表** | | Name  姓名\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Chinese中文) (English英文) | | Date of Birth Sex 出生日期 年(Y) 月(M) 日(D) 性別 \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | 請問是否已成爲本會會員？  □ 普通會員  □ 永久會員  □ 否（需連同會員申請表格一同遞交）  Are you a member of HKWPA?  □ Ordinary member  □ Permanent member  □ No, please submit together with the membership application form. | | Body Weight Class Age Category\* Open / Junior  參加體重級別 年齡組別\* (公開組、少年組、青年組及元老組)  \*Please delete 請將不合適刪去  參加賽事 Participating event:  請選擇Please Choose: □ 有裝備 Equipped □ 無裝備 Classic  The participation fee included one souvenir T- shirt  費用包括註冊費及紀念T-Shirt一件  請選擇Please Choose: □ Size: S □ Size: M □ Size: L □ Size: XL □ Size: XXL  □ Size: XXXL | | Occupation E mail  職業 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 電郵地址 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Home Address  住址 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | I/D or Passport No. Tel No.  身份證號碼 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 電話 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | **過往活動申報:**  請問由申請報名當日起計過去12個月內是否曾經參與並非由本會主辦之健力比賽？ 是 □ 否 □  如答“是”，請填寫以下資料:（“參與”包括以運動員、裁判或工作人員身份參加該活動）  (注: 依本會規章47條，除非得到執行委員會的同意: (a)會員不可以參加由非本會舉辦的比賽; (b)不得允許HKWPA的工作人員為非總會或總會下屬成員主辦的比賽擔任裁判或提供協助，或為不屬於總會的組織提供指導。)   |  |  |  |  | | --- | --- | --- | --- | | 活動名稱 |  | 活動名稱 |  | | 活動日期 |  | 活動日期 |  | | 主辦單位 |  | 主辦單位 |  | | | |
| **Declaration:**  Have you participated in any powerlifting competition (as an athlete, referee or staff) which was not organized by HKWPA in the past twelve months? (As at the date of nomination) Yes □ No □  (Note: According to HKWPA Memorandum & articles Clauses 47. Unless approved by the Executive Committee: -  (a) No member of the affiliated organization shall be permitted to participate any competition or display organized by organizations not affiliated to the Association; (b) No official of the HKWPA shall be permitted to adjudicate or assist at competitions or displays not organized by the Association or by the affiliated Members of the Association, or to instruct at organizations not affiliated to the Association.)  If the answer is “Yes”, please specify the details of competition:   |  |  |  |  | | --- | --- | --- | --- | | Event Name |  | Event Name |  | | Date |  | Date |  | | Organizer |  | Organizer |  |   備註: 參加者須如實填報所有資料, 如資料不全或資料失實, 本會有權取消其報名資格。  Remarks: Applicant is required to fill in all information truthfully, HKWPA reserve the rights to reject the application in  case of incomplete information or any false information is provided.  **聲明 Declaration：**  本人願意遵守賽會一切規則及裁決，並明白此運動帶有危險性，參加者承擔個人一切意外責任(包括傷亡)，主辦及協辦團體概不負責。由簽字日起生效。  I will obey the regulation and decision of The Hong Kong Weightlifting and Powerlifting Association Limited. I also understand that the competition carries risk of injury. The organizer will not be liable for any injury or loss of life and it is my sole responsibility.  日期Date : 年(Y) 月(M) 日(D) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (簽署Signature) |

Appendix 3 to the IPF Anti-Doping Rules – Consent Form

CONSENT FORM

As a member of and/or a participant in an event National Federation

authorized or recognized by the International Powerlifting Federation (IPF), I hereby declare as follows:

I acknowledge that I am bound by and confirm that I shall comply with all of the provisions of the IPF Anti-Doping Rules (as amended from time to time) and the *International Standards* issued by the World Anti-Doping Agency and published on its website.

I acknowledge the authority of the IPF under the IPF Anti-Doping Rules to enforce, to manage results under, and to impose sanctions in accordance with the IPF Anti-Doping Rules.

I agree to submit to urine or blood testing when requested to do so and to respect all possible consequences arising from the doping control process.

I agree and consent to the IPF collecting, processing, disclosing and using information for the purposes of the implementation of the IPF Anti-Doping Rules in accordance with the International Standard for the Protection of Privacy and Personal Information and pursuant to applicable data protection laws.

I understand that I have important obligations under the IPF Anti-Doping Rules and that I am liable for a breach of these obligations.

I also acknowledge and agree that any dispute arising out of a decision made pursuant to the IPF Anti-Doping Rules, after exhaustion of the process expressly provided for in the IPF Anti-Doping Rules, may be appealed exclusively as provided in Article 13 of the IPF Anti-Doping Rules to an appellate body for final and binding arbitration, which in the case of International-Level Athletes is the Court of Arbitration for Sport (CAS).

I acknowledge and agree that the decisions of the arbitral appellate body referenced above shall be final and enforceable, and that I will not bring any claim, arbitration, lawsuit or litigation in any other court or tribunal.

I have read and understand the present Consent Form.

Date Print Name (Last Name, First Name

Date of Birth Signature (or if a minor, signature of

(Day/Month/Year) legal guardian)