**HONG KONG AIR CADET CORPS**

Photo

**Skills Development and Support Group**

**No. 31 Senior Non-commissioned Officer Training Course**

**Application Form**

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| Personal Particulars |
| Name: |  |  |  |  |  |
|  |  (Surname) |  |  (Given Name) |  |  (Chinese) |
| Age: |  | Year of Over-age: |  |
|  |
| E-mail: |  |
|  |
| Telephone Number: |  |  |  |
|  |  (Home) |  |  (Mobile) |
| **II. Service History** |
| Unit: |  |  | Serial Number: |  |
|  |
| Present Classification: |  |  | Educational Level: |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Date of Promotion to Cpl: |  |  | Position Presently Held: |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Qualified Instructor Rating (Expiry Date): |  |
|  |  |  |  |  |
| **III. Expectation upon completion of the SNCOTC** |
|  |
| **IV. Endorsement by OC Unit:**

|  |  |
| --- | --- |
| **Signature:** |  |
| **Rank:** |  |
| **Name:** |  |
| **Unit:** |  |
| **Date:** |  |
|  |  |

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**參加者聲明**

**Participant’s Declaration**

本人明白，上述課程／活動可能包括體能及歷險訓練成份，如本人在參與課程／活動期間遭遇意外受傷，本人同意香港航空青年團及其安排活動的有關人士無須負上任何責任。本人身體並無任何健康問題令本人不適宜參與上述課程/活動．

I understand that the above course/activity may involve physical exercise and adventurous training, and agree that the Hong Kong Air Cadet Corps and its members shall not be responsible for accidents or injuries, if any, occur to me during the training. I declare that I have no health problem which prevents me from participating in the above course/activity.

|  |  |
| --- | --- |
| 簽署Signature: |  |
| 姓名Name: |  |
| 日期Date: |  |

**參加者家長 / 監護人或授權人聲明書**

**Participant’s Parent / Guardian or Person Authorized by Participant’s Parent / Guardian’s Declaration**

*參加者須由家長／監護人或經其家長/監護人授權者填寫此同意書(家長／監護人或「獲授權人」必須為十八歲或以上人士)。*

*This consent form should be completed by parent/guardian of participant or by person authorized by their parent/guardian (parent/guardian or authorized person should be at 18 years of age or above)*

本人同意參加者參加上述課程／活動，並聲明他/她身體並無任何疾病，令他／她不宜參加此項課程/活動。如果因參加者的疏忽或體能欠佳，以致在參加這項課程/活動時傷亡，香港航空青年團及其安排課程／活動的有關人士無須負上任何責任。

I agree to allow the participant to participate in the above mentioned course/activity and declare that he/she does not suffer from any illness that renders him/her unfit for the course/activity. The Hong Kong Air Cadet Corps and its members shall not be liable for any injury or death which the participant may suffer in this course/activity, if the cause of injury or death is due to his/her negligence or inadequacy in health and fitness.

|  |  |
| --- | --- |
| 家長／監護人或獲授權人簽署Parent / Guardian of Authorized Person’s Signature: |  |
| 姓名Name: |  |
| 聯絡電話號碼Contact Telephone Number: |  |
| 日期Date: |  |