



AFFILIATED CLUB VENUE BOOKING APPLICATION FORM

To: Hong Kong Baseball Association
Tel: 2504 8330 Fax: 2504 4663 Email: hkbsa@hkolympic.org
Room 1003, 1/F., Olympic House, 1 Stadium Path, Causeway Bay, Hong Kong.

Contact Person: \* Mr. / Ms. / Mrs.
Tel: Fax: Email:
Mailing Address:

BOOKING DETAILS:

Table with columns: Date (DD MM YY), Venue, Time, Put "Y" if use for CSC\*, No. of Sess., No. of Participants (Under 18, Over 18), Rate/Sess. (HKD), Amount (HKD), Official Use Only.

Sub-total: \$0.00
Adm. Charges: session X \$10.00 /session \$0.00
Adm. Charges (For Shek Kip Mei and Lion Rock only): session X \$100.00 /session \$0.00

\* Please attach the CSC course leaflet for booking approval.

Total: \$0.00

DECLARATION:

\* We understand and agree that Hong Kong Baseball Association will give the following information to the Leisure and Cultural Services Department for emergency contact purpose.
Authorized signature:
Name in block letter:
Title:
Stamp of Affiliated Baseball Club:
Emergency Contact:
Name: Mobile:
Title:

(Official Use Only)

Debit Note No.: BA /
Payment: CASH / \*\*Cheque No.
Receipt No.:
Handled by: Checked by: Venue Confirmation Ref No.:

\*\* Please make cheque payable to "Hong Kong Baseball Association Limited" or "香港棒球總會有限公司".