

## **Baseball** @ SummerFest Action

## **Group Enrolment Form**

To: Hong I	Kong Baseball Association		
Date:	Monday, 17 July 2017		
Time:	14:00-18:00		
Venue:	Central Harbourfront Event Space		
Estimated A	arrival Time:	Estimated Depart Time:	
Name of Or	ganization/School/Team:		

ivision:	☐ Primary School ☐	Secondary School	$\square$ W	heelchair
	Name in Chinese	Name in English	Sex	Grade/Form Attending (if applicable)
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Name of Contact Pe	erson:	
Post of Contact Pers	son:	
Contact Number:	Mobile)	Office)
Email:		
Date:		