

# HKHAUS (20\_\_/20\_\_)

## Request for Practical Assessment Form

All items must be filled in for record.

TP Number: \_\_\_\_\_

### Section One – Personal Information

Surname: \_\_\_\_\_ Other Names: \_\_\_\_\_

Email Address: \_\_\_\_\_

Contact Number: \_\_\_\_\_

Gender: Male / Female

Date of Birth: \_\_\_\_\_

Club: \_\_\_\_\_

Team: \_\_\_\_\_

Division: \_\_\_\_\_

### Section Two – Declaration

I hereby declare that the above details are complete and accurate. I agree to abide by the current HKHA Rules and bye-laws of the HKHA - Umpires' Section (**Bye-laws available for reference at [www.hockey.org.hk](http://www.hockey.org.hk)**). I also understand and agree that neither the HKHA, nor the HKHAUS, nor their officials, shall be responsible for any incident, accident or injury sustained by me as a result of my participation in hockey as a spectator, player or official.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

The form must be returned with *a cheque of prescribed fee\** made payable to *“The Hong Kong Hockey Association”* or ATM / Online Banking: **658-117619-001**

Please write down *your full name* and Umpire Number (if any) at the back of your cheque and photos.

Please send the form to

*Hon. Secretary, HKHAUS at 1st Floor, Administration Block, King's Park Hockey Ground, 6 Wylie Road, Kowloon*

\*\$100 for TP, \$150 for Class 3 and Class 2.

Please write down *your full name* and Umpire Number (if any) at the back of your cheque and photos.