

For Official Use	
No.	Date

**APPLICATION FOR USE OF
LEISURE AND CULTURAL SERVICES DEPARTMENT
(LCSD) SWIMMING POOLS**

- (1) Name of Applicant : (English)
(Chinese)
-
- (2) Postal Address: _____ Tel.no. _____ Fax no.: _____
-
- (3) Name of Affiliated Organization: _____
-
- (4) *Registration Certificate/ Identity Card no.: _____
-
- (5) Name of Swimming Pool Required : _____
-
- (6) Facilities Required :+
(tick whichever appropriate)
- | | |
|--|-------------------------------------|
| Main/ Secondary * Pool..... [] | High Board Diving..... [] |
| () 50M Lanes in the Main /
Secondary* Pool [] | P.A. System..... [] |
| () 25M Lanes in the 25M Pool..... [] | Lane Dividers..... [] |
| Diving Pool..... [] | Starting Horn..... [] |
| Training/Teaching Pool..... [] | Timing Equipment..... [] |
| Spectator Stand..... [] | Portable Starting platform..... [] |
| Whole/Half of Children Pool..... [] | Others : _____ [] |
- # Use of 25M lanes in the 25M pool of Shing Mun Valley Swimming Complex is only permitted during sessional breaks
-
- (7) Purpose of use : (tick whichever appropriate)
- | | |
|---------------------------------------|--------------------------------------|
| (a) Swimming* lesson/Training for [] | (c) Life-saving training..... [] |
| (i) novice and non-swimmers .. [] | (d) Life-saving examination..... [] |
| (ii) stroke improvement..... [] | (e) Underwater activities..... [] |
| (iii) advance training..... [] | (f) Others : _____ [] |
| (b) Swimming Competition..... [] | [] |
-
- (8) Period of use (should not last for more than 2 months) :
- From : _____ To : _____

Date	Day	Time		Remarks
		From	To	
	Sun			
	Mon			
	Tue			
	Wed			
	Thu			
	Fri			
	Sat			

- (9) For hiring of whole main pool :
- (a) Anticipated number of persons attending :
Competitors _____ (Nos.) Spectators _____ (Nos.)
- (b) If there are admission charges for spectators, please give full details of the number and price of admission tickets to be issued.

(10) Please state whether you can provide qualified lifeguards on duty during the period of hire.
*Yes / No

If yes, please state the number _____.

(11) Do you charge the participants? *Yes / No

If yes, how much \$ _____ per person

(12) Name of person in charge during use :

* Mr /Miss : _____ Position Held : _____

HKID Card _____ Tel. No. : _____

No. : _____

(13) Particulars of coach(es) in charge of swimming lessons / training or underwater activities under application : -

(a) Name : _____

(b) HKID Card No. _____

(c) Is the coach a holder of one of the following valid teacher / coach qualifications? *Yes/ No (If yes, please tick the appropriate box below)

For Swimming lessons / trainings :

- (i) Swimming Teacher's Certificate issued by the HK Amateur Swimming Association
- (ii) Swimming Teacher's Certificate issued by the Swimming Teachers' Association (HK)
- (iii) Level 1 Coaches Certificate issued by the HK Swimming Coaches Association and endorsed by the HK Amateur Swimming Association
- (iv) For conducting school swimming lessons / trainings either
- (1) a qualified physical education teacher possessing a Bronze Medallion (or higher level) issued by the Hong Kong Life Saving Society, or

- (2) other equivalent swimming teaching qualifications issued by the Education Department and the possession of a Bronze Medallion (or higher level) issued by the Hong Kong Life Saving Society.

For Underwater activities :

HK Underwater Association Instructor Certificate

- Note:
- (i) Enclose a copy of the above-mentioned qualification (s) with this application form.
 - (ii) Any person not in possession of one of the above-mentioned respective qualifications is not permitted to conduct swimming lessons/trainings or underwater activities respectively in LCSD swimming pools.
 - (iii) Any person in possession of the qualifications which are not on the list above should seek the endorsement from the respective authorized associations in Hong Kong to certify the qualifications in their own accords.
 - (iv) Incomplete and inaccurate information, either intentionally or unintentionally, will render this application void.

(14) Date of last hiring and name of pool :

(15) If the swimming pool is not available on the date(s) and time you require, which alternative swimming pool do you prefer?

Name of the Swimming Pool :

**Delete where inapplicable

If this application is approved, I hereby undertake on behalf of _____

to meet, on demand by LCSD, all charges and additional charges arising from the hiring, and to meet the cost of repairing any damage caused and of repairing or reinstating or replacing any equipment, fixture, fittings, furniture or other property damages or destroyed, stolen or removed during this function.

I have read and undertake to observe, the Terms and Conditions of Hire attached to this form relating to Swimming Pools and agree to indemnify LCSD in accordance with the Terms and Condition of Hire, in respect of all actions, proceedings, claims or demands arising out of any accident, death, injury, loss or

damage which may occur in the Swimming Pool during the period of hire.

Signature :

Name in BLOCK letter :

Position held :

Name of Organization :

Date :

Official chop/seal :

FOR AFFILIATED CLUB OF HKASA / HKLSS /
HKUA / SWD / NATIONAL SPORTS ORGANIZATIONS /
DISTRICT SPORTS ASSOCIATIONS

This application is vetted and recommended by

Signature :

Name in BLOCK letter :

Position held :

*HKASA/ HKLSS/ HKUA / SWD/ DSA / Others :

Date :

Official chop/seal :

**Delete where inapplicable

- Note :
- (1) The provision of your personal information in this form is obligatory. If you do not provide the requisite personal information, LCSD may not be able to process your application.
 - (2) Your data will be used for booking of facility, statistical analysis, further contact and mailing of information.
 - (3) Apart from those staff duly authorized by LCSD, no one will be given access to your personal information.
 - (4) You may contact the district staff who processes your case to correct or access your own personal data.