**開辦香港紅十字會制服團隊申請表格**

**Application Form for Establishment of Hong Kong Red Cross Unit**

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| **請選擇所屬總部Please choose headquarter** |
| **□ 總辦事處****Head Office** | **□ 港島總部****Hong Kong Island Divisional Headquarters** | **□ 西九龍總部****West Kowloon Divisional Headquarters** | **□ 東九龍總部****East Kowloon Divisional Headquarters** | **□ 新界西總部** **West New Territories Divisional Headquarters** | **□ 新界東總部****East New Territories Divisional Headquarters** |
| **香港西九龍海庭道19號香港紅十字會總部8樓****Hong Kong Headquarters, 19 Hoi Ting Road, West Kowloon, Hong Kong.****電話: (852) 2802-0021傳真: (852) 3103-4001電郵: yds@redcross.org.hk** | **香港灣仔軒尼詩道130號修頓中心6字樓****6/F, Southorn Centre, 130 Hennessy Road, Wanchai, Hong Kong.****電話: (852) 2838-6677傳真: (852) 2572-9076電郵: hkid@redcross.org.hk** | **香港西九龍海庭道19號紅十字會總部1樓****1/F, Hong Kong Red Cross Headquarters, 19 Hoi Ting Road, West Kowloon, Hong Kong.****電話: (852) 2711-5269傳真: (852) 3103-4048電郵: wkd@redcross.org.hk** | **香港九龍觀塘翠屏南邨翠松樓C座地下****G/F, Wing C, Tsui Chung House, Tsui Ping South Estate, Kwun Tong, Kowloon, Hong Kong.****電話: (852) 2772-0900傳真: (852) 2772-0966電郵: ekd@redcross.org.hk** | **香港新界荃灣大窩口邨富雅樓1號地下****Unit 1, G/F, Fu Nga House, Tai Wo Hau Estate, Tsuen Wan, N.T., Hong Kong.****電話: (852) 2424-6342傳真: (852) 2428-8201電郵: wntd@redcross.org.hk** | **香港新界沙田正街1號A紅十字會白普理沙田中心2樓****2/F, Hong Kong Red Cross Bradbury Shatin Centre, 1A Shatin Centre Street, Shatin, N.T., Hong Kong.電話: (852) 2603-0038傳真: (852) 2603-0263電郵: entd@redcross.org.hk** |

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| **學校／機構資料School/Organization information** |
| **申辦團隊Apply Unit** | **□** | **紅十字小同伴****（6-7歲）****Red Cross Little Buddies (Age 6-7)** | **□** | **少年團（8-12歲）****Junior Unit (Age 8-12)** | **□** | **青年團（12-17歲）****Youth Unit (Age 12-17)** | **□** | **成人團（17-50歲）****Adult Unit (Age 17 -50)** |  |  |
| **學校／機構名稱School/Organization Name** | **（中文）** |  |
| **（Eng）** |  |
| **地址****Address** | **（中文）** |  |
| **（Eng）** |  |
| **電話 Telephone** |  | **傳真 Facsimile** |  | **電郵 Email address** |  |
| **學校／機構開辦日期** **School/Organization Established Date** |  | **(日/月/年) (dd/mm/yyyy)** |
| **學校／機構負責人姓名****Name of Authorized Person** | **（中文）** |  | **職位****Position** | **（中文）** |  |
| **（Eng）** |  | **（Eng）** |  |
| **學生／會員人數 No. of Students/Members** |  | **學生／會員年齡層 Age Group** |  | **至 to** |  |
| **學校班級數目** **No. of Class \*(學校適用For School only)** |  | **年級 Grade** |  | **至 to** | **年級****Grade** |  |
| **學校／機構有否參與其他制服團隊****Does School/Organization join other uniform group** | **□ 有 Yes** | **請列明****(Please Specify)** |  | **□ 否 No** |

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| **團隊負責人資料 Unit-in Charge Information** |
| **姓名****Name** | **（中文）** |  | **職位 Post** |  | **聯絡電話 Contact No.** |  |
| **（Eng）** |  | **電郵 Email address** |  |
| **曾否參加香港紅十字會成為會員** **Have ever joined Hong Kong Red Cross as a member** | **□ 是 Yes**  | **加入年份 Joined Year** |  | **□ 否 No** |
| **會員類別 Membership Type** |  |
| **曾否參加其他制服團體****Have ever joined other uniform group** | **□ 是 Yes**  | **制服團體名稱 UG Name** |  | **□ 否 No** |
| **加入年份 Joined Year** |  |
| **會員類別 Membership Type** |  |

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| **學校／機構希望成立紅十字會團隊之目的Objectives of Establishment of HKRC Unit** |
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| **期望紅十字會團隊於學校／機構擔任的服務 Expectation of services delivered by HKRC Unit**  |
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**本學校／機構瞭解成立香港紅十字會制服團隊之程序，並願意贊助團隊於學校／機構內成立。**

**We fully understand the procedure of establishment of HKRC Unit and sponsor its establishment within our school/organization**

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| **日期 Date** | **學校／機構印鑑 School/Organization Chop** | **學校／機構負責人簽署 Signature of Authorized Person** |