**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** |