



Hong Kong Institute of
Certified Public Accountants
香港會計師公會

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CPA Badminton Championship



Join the Tournament of the fastest racquet sport in the world!

Date: **25 June, Sunday**

Programme: 9:00 am – 1:30 pm Competition
1:30 pm – 2:00 pm Prize presentation

Venue: Hong Kong Sports Institute, 25 Yuen Wo Road, Sha Tin.
Click [here](#) for the location map

Fees: **\$180** for ONE event;
\$230 for more than one event

Eligible player: HKICPA members only

Formats:

- Events include Men's Singles, Women's Singles, Men's Doubles, Women's Doubles and Mixed Doubles.
- Each contestant can join up to three events.
- Single knock-out format at 21 points.
- An event will only proceed if there are at least 4 contestants or 4 teams in the case of doubles.
- The maximum number for each event is 16 contestants or 16 teams, subject to change based on the final enrolment.
- Rules will be distributed to all registered players after the closing date for enrolment.
- An open draw will be held on **14 June, Wednesday, at 7:15 pm, HKICPA, Board Room, 37/F Wu Chung House.**

Prizes: Champion, 1st, 2nd and 3rd runner-up for **each event**.

Registration

To register, please complete the enrolment form and return it with full payment to the Institute on or before **12 June 2017**.

Enrolment is on a first-come first-served basis. A confirmation email will be sent out by 13 June to confirm your registration status.

Enquiries

Miss Wong Wan Ki
Member and Public Relations
Tel: 2287 7017
Email: wkwong@hkipa.org.hk





Hong Kong Institute of
Certified Public Accountants
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CPA Badminton Championship Enrolment Form

Event Code: OTHR17062502

Finance & Operations Department,
Hong Kong Institute of CPAs
37th Floor, Wu Chung House,
213 Queen's Road East, Hong Kong.
Fax no: 2893 9853

25 June 2017

(Please reply on or before **12 June.**)

FOR OFFICE USE

Seq. no.:

Handled by:

Please allow 4 working days to process your application. You can check your enrolment status at "My CPA" at www.hkicpa.org.hk.

Name:	(Mr./Mrs./Ms.)	BmIG member:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Membership No.:		Email:	
Tel:		Mobile:	(for emergency contact on the day of activity)

Event:	<input type="checkbox"/> Men's Singles <input type="checkbox"/> Women's Singles		
	<input type="checkbox"/> Men's Doubles <input type="checkbox"/> Women's Doubles <input type="checkbox"/> Mixed Doubles		
Partner's name: (if applicable)	Name: Membership No.:	Name: Membership No.:	
Note:	<ul style="list-style-type: none">- Prior consent from your partner is required before you name him/her as your Doubles' partner.- A separate enrolment form is required for your Doubles' partner		

Entry fee: ☐ \$180 for one event ☐ \$230 for more than one event

Payment Method (Please tick the appropriate box)

<input type="checkbox"/> Cheque (no. _____) payable to "Hong Kong Institute of Certified Public Accountants" or "HKICPA"			
<input type="checkbox"/> BOC HKICPA VISA <input type="checkbox"/> BOC HKICPA UnionPay card <input type="checkbox"/> Other VISA / MasterCard			
Card Number:		Card Expiry Date (MM/YY):	
Cardholder's Name (block letters):	Cardholder's Signature:	Date:	
<input type="checkbox"/> I would like to have an official receipt. (Remarks: Official receipt will be sent to your email address provided above.)			

Declaration

I declare that I do not suffer from any illness/disability that renders me unfit to participate in the above activity. I will immediately notify the convenor of the interest group/HKICPA if, for any reason, my health subsequently renders me or may render me unfit to participate in the above activity. I fully accept that the convenor of the interest group/HKICPA will then consider whether I should, in the interest of safety or the safety of the other participants, continue to be allowed to further participate in future sessions and that his/her/the decision of the HKICPA will be final.

Where trainers are in place, I agree to follow the trainer's instructions. I agree that this may be a verbal, visual, physical or demonstrative form of communication. I will ask for further clarification of any ambiguous and/or inaudible instructions. I understand that I will be asked to leave a session immediately if deemed to be deliberately ignoring the instructions from the trainer.

Assumption of Risks and Disclaimer of Liability

As a participant in the above activity you accept that you may be exposing yourself to risk of harm due to the hazards inherent in the activity.

Signature: _____ Date: _____

(Please read notes on enrolment and privacy policy on the next page)

For payment by cheque, please fill-in your postal address for refund in case the event is full or cancelled.	
Name :	Name :
Address:	Address :

Notes:

1. Enrolment for the activity is accepted on a first-come-first-served basis.
2. The event is subject to cancellation should the minimum number is not reached.
3. Full payment must be made before your enrolment will be processed. No telephone reservation will be accepted.
4. The closing date for enrolment is **12 June**. However, the Institute has the discretion to accept late enrolments as it sees fit.
5. Registration by fax will **ONLY** be processed when payment is made by credit card. Cash is strictly **NOT** accepted.
6. Successful registrants will receive confirmation by email or by telephone, whereas unsuccessful registrants will receive full refund.
7. If you do not hear from us by 13 June, please contact Miss Wong Wan Ki at 2287 7017 / Miss Elaine Wai at 2287 7230.
8. Unless the activity is cancelled due to unforeseen circumstances, low enrolment or bad weather, no refund for withdrawal will be entertained after the enrolment has been processed.
9. Bad weather arrangement: The activity will be cancelled if typhoon signal no. 8 or above / Black Rainstorm Warning is hoisted 2 hours prior to the commencement of the activity.
10. The Institute reserves the right to change the venue and date of the course due to unforeseen circumstances.

Personal Data: Your personal data collected from the enrolment process and administration of courses/events/activities will be used for the purpose of the administration of the course/event/activity on which you are enrolled ("Event"). Such data collected may be accessible by the Institute's officers, persons or committees processing the application and related matters. In addition, the Institute may use the collected data for statistical research and analysis. By submitting this Enrolment Form, you understand and agree that the Institute may provide your personal data above to co-organisers/service providers in or outside Hong Kong for the purpose relating to the Event. The Institute intends to use the personal data of your name, email address and correspondence address to inform you, where relevant, of members' benefits, goods, services, facilities and events organized or provided by the Institute or other organizations. Members and registered students may opt out of receiving such materials at any time by logging in via the following link <http://mas.hkicpa.org.hk/mycpa/communication/preference>. Non-members may opt out of receiving such materials at any time by sending an email to the Institute at privacyofficer@hkicpa.org.hk or a letter to the Institute's privacy officer. For more information about the privacy policy of the Institute, please go to <http://www.hkicpa.org.hk/en/service-tools/privacy-policy/>.

Event Information Enquiry: 2287 7017 / e-mail: wk Wong@hkicpa.org.hk

Payment & Enrolment Status Enquiry: 2287 7381 / e-mail: finance@hkicpa.org.hk