Les Escrimeurs

第十屆回歸盃-2015 全港劍擊分齡賽

劍舍 主辦

The 10th Reunification Cup - Hong Kong Age Group Fencing Tournament 2015

Organized by Les Escrimeurs (Hong Kong)

比賽詳情 Competition General Information

比賽日期 Date: 二零一五年七月一日(星期三) | 1 July, 2015 (Wednesday)

比賽地點 Venue: 九龍灣體育館 | Kowloon Bay Sports Centre

地址: 九龍灣啟樂街 15 號 | Address: 15 Kai Lok Street, Kowloon Bay

比賽項目 Events: U14, U12 & U10: 男子花劍 及 女子花劍

U14, U12 & U10 : Boys' Foil & Girls' Foil

比賽資格 Eligibility: * 只可參加一個項目 | Only compete in one event

(以出生年份計) (Year of Birth)

U-10 – 2005 或 2006 年出生 | Born in 2005 or 2006 U-12 – 2003 或 2004 年出生 | Born in 2003 or 2004 U-14 – 2001 或 2002 年出生 | Born in 2001 or 2002

比賽費用 Fees: \$90 +\$10 (保險費用 Insurance fee)

報到時間 Schedule: (以下為截止時間) (all times refer to close of registration)

 男子花劍 Boys' Foil
 女子花劍 Girls' Foil

 U10
 9:00 am
 9:30 am

 U12
 12:00 noon
 12:30 pm

 U14
 3:00 pm
 3:30 pm

比賽方式 | Format:

▶ 個人及團體賽比賽依 FIE 規則進行,亦會根據實際比賽情況作更改。比賽先進行一輪小組排 名賽(淘汰賽的人數將根據比賽情況而定),然後進行直接淘汰賽。個人賽小組分組以抽籤形式 進行。

The competition is run under FIE Rules, subjects to changes by the organizer. The competition formula is one round of pools (number eliminated will depend on size of event) followed by Direct Elimination. The composition of pools is by drawing lots in Individuals events.

<u>器材 | Equipment:</u>

▶ 參賽者必須自備全套劍擊制服及比賽器材(包括傳導性護頸花劍面罩),面罩及劍擊服的最低要求為符合國際標準 EN15367:2002 及其抗穿透力測試達 350N。參賽者亦必須穿著符合國際劍擊聯會認可之 800N 內穿護甲。

Participants should prepare full fencing uniform and gear (including Mask with conductive bib for foil). The mask and uniform must comply with the standard EN13567:2002 and 350N of the minimum penetration resistance force. All participants must wear an 800N under-plastron which conforms to the FIE rules

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報名辦法 Application Procedures:

▶ 請填妥報名表及家長同意書,連同劃線支票 (請勿郵寄現金) 抬頭 "劍舍" 寄回 新蒲崗六合 街五號五樓。請於支票背頁寫上姓名及聯絡電話。

Post the Entry Form and parent's consent form, with a crossed cheque (Do Not Send Cash) made payable to "Les Escrimeurs (Hong Kong)" to <u>5/F, 5 Luk Hop Street, San Po Kong, Kowloon</u>. Please write down the name and telephone number of the contact person on the back of the cheque

注意事項 | Notes:

名額有限,先到先得。Due to limited quotas; application will be accepted on a first come first serve basis.

比賽費用及比賽名額不得轉讓及退還。

Fees and registrations on competition cannot be transferred from one applicant to another. There is no refund in the event of any withdrawal.

若比賽人數不足,或特殊情況下,劍舍有權取消其有關之比賽。

Les Escrimeurs (Hong Kong) reserves the right to cancel the competition if there is insufficient enrolment or unforeseen difficulties arising from mounting the competition.

比賽名單將於六月十五日後公佈,參賽者可瀏覽劍舍網頁確認比賽資格

Participants can check our web site www.lehk.org for confirmation of entry after deadline.

如有任何疑問,請聯絡: | For enquires, please contact: lehongkong@gmail.com / Mr. Chow Chi Sang: 9437-7061

截止報名日期 Deadline for Application: 15 June, 2015

劍舍: Les Escrimeurs (Hong Kong): www.lehk.org / Tel: 3488-0781



Processed by:

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報名表格 Entry Form

比賽項目:	□ 男子花	劍	口 女子花劍
Event:	Boys'	Foil	Girls' Foil
	□ U-10 -2005	或 2006 年出生 Born in 2005 or 2006	□ U-12 -2003 或 2004 年出生 Born in 2003 or 2004
□ U-14 -2001 或 2002 年出生 Born in 2001 or 2002			
(請於參與項目□內填上☑) (Please ☑ the appropriate □) *只可参加一個項目 Only compete in one event			
參賽者資料 Participant information			
英文姓名 Name in English:		中文姓	名 Name in Chinese:
			性別 Sex :
代表屬會/學校:		(代表屬會/學校資料只作比賽排名用) ("Competition Club/ Current School"	
Competition Club /		is the club/school which you are representing in competitions. Club	
Current School:		and s	school information is for internal use in seeding each
		compe	etition.)
聯络電話 Contact Telephone:			生日期 Date of Birth:
電郵地址 E-mail Address:			
緊急聯络人:			緊急聯络人電話:
Emergency Contact Person:		Em	nergency Contact No.:
家長同意書 Parent's Consent Form			
本人,(申請人姓名) 現聲明本人的健康及體能良好並適宜參與由香港劍舍舉辦之比賽及承擔有關之			
風險。本人同意如本人因參加有關比賽而引致受傷/死亡或財物損失,劍舍 及/或其主管人員無需負任何責任。			
I,(Applicant's Name) hereby declare that I am Physically fit and suitable to participate in the Competition organized			
by Les Escrimeurs (Hong Kong) at my own risk. I further agree that Les Escrimeurs (Hong Kong) and/or its responsible officer(s) shall			
not be liable for any injury/death and/or loss of belongings/properties that I may suffer in the Competition.			
	申請日期 Date :		
申請人簽名:			監護人簽名:
Applicant's Signature:		Parent's Guardian's Signature:	
For Les Escrimeurs (Hong Kong) use only:			
Date:			