

## Part A : Course Details 第一部份: 課程資料

Course Code 課程編號	Starting Date 開課日期	Please "✓" if Early Bird or other Special Offer 若屬提早報名或其他優惠, 請以「✓」以下方格				Fee 學費
		<input type="checkbox"/> Early bird 提早報名	<input type="checkbox"/> Group Discount 團體報名	<input type="checkbox"/> Coupon 優惠券	<input type="checkbox"/> Member 會員	\$
		<input type="checkbox"/> Early bird 提早報名	<input type="checkbox"/> Group Discount 團體報名	<input type="checkbox"/> Coupon 優惠券	<input type="checkbox"/> Member 會員	\$
△ For those who enroll our public paid course and apply the membership at the same time, they are entitled to enjoy the member price immediately. 若報讀本學院公開收費課程, 及同時申請會員者, 可即時享有會員價。					Total Amount 總額	\$

## Part B: Personal Details 第二部份: 個人資料

Members Only: Please fill in the membership number and name only if you have no amendment for other fields in Part B.  
會員請注意: 若個人資料沒有任何更改, 只需填上會員編號及姓名便可。

Membership Number 會員編號 \_\_\_\_\_ Name in English 英文姓名 \_\_\_\_\_

Name in English 英文姓名 \_\_\_\_\_ Mr./Ms.

Name in Chinese 中文姓名 \_\_\_\_\_ 先生/女士

Telephone 電話 \_\_\_\_\_ Fax 傳真 \_\_\_\_\_

Email 電郵 \_\_\_\_\_

Correspondence Address (Eng)  
通訊地址 (英文) \_\_\_\_\_

Position 職位名稱 \_\_\_\_\_

Company/Organization  
公司或機構名稱 \_\_\_\_\_

Business Sector 行業類別: ☐ NGO 非政府機構 ☐ Education Institution / School 教育機構/學校  
☐ Government Department 政府部門 ☐ Corporate 商業機構  
☐ Others 其他 \_\_\_\_\_

Service Nature 服務性質: ☐ Social Security 社會保障 ☐ Family & Children 家庭及兒童福利 ☐ Clinical Psychology 臨床心理  
☐ Medical 醫療 ☐ Rehabilitation 康復 ☐ Elderly 安老 ☐ Youth 青少年  
☐ Offender 更生人士 ☐ Community Development 社區發展  
☐ Employee Development 僱員發展 ☐ Others 其他 \_\_\_\_\_

How did you learn about  
our courses?  
您從甚麼途徑認識本學院課程?  
☐ Course brochure 課程小冊子 ☐ Referral 朋友推介 ☐ Internet 網上瀏覽  
☐ Course information by email 電郵課程資料 ☐ Others 其他 \_\_\_\_\_

## Payment 付款

Please note: If payment by bank transfer, there will be no refund for the overpaid  
請注意: 若使用銀行轉賬繳費, 多交費用, 恕不退回。

1. Bank Transfer 銀行轉帳 HSBC 香港上海匯豐銀行: 018-0-074684 HKBEA 東亞銀行: 147-10-09911-1

Please email the receipt of bank transfer and completed enrollment form to institute@nlpra.org.hk.

請電郵入數紙副本和課程報名表格至 [institute@nlpra.org.hk](mailto:institute@nlpra.org.hk)。電郵主題請註明姓名及課程名稱。

2. Cheque 支票

Please indicate the name and course title on the back of the cheque. Please use one cheque for each course and send completed enrollment form and crossed cheque to:

[Jockey Club New Life Institute of Psychiatric Rehabilitation, 332 Nam Cheong Street, Shamshuipo, Kowloon](#)

請於支票背面寫上姓名及課程名稱。每個課程請獨立使用一張支票。請將填妥之課程報名表格及支票寄回:

[九龍深水埗南昌街332號賽馬會新生精神康復學院](#)

Please make crossed cheque payable to "New Life Psychiatric Rehabilitation Association" 支票抬頭請寫「新生精神康復會」

Name on the Receipt 收據抬頭: \_\_\_\_\_

Remarks 備註: Once registration is confirmed, it will be processed and cannot be refunded for any reasons. All requests for any change of registration must be made in writing. An administrative fee of HK\$200 will be charged for any processing request.  
課程申請一經確認, 恕不退款。如報名者對其申請有任何改動, 須以書面申請及繳付港幣二百元行政費用。

- ☐ I agree 本人同意 New Life Psychiatric Rehabilitation Association to use my personal data for promotion of services, events, fund-raising, volunteer recruitment, training courses, products and opinion collection, etc.
- ☐ I disagree 本人不同意 新生精神康復會使用本人之個人資料向本人發放有關服務、活動、籌款、義工招募、培訓課程、產品及意見收集等推廣資訊。

Signature

簽署: \_\_\_\_\_

Date

日期: \_\_\_\_\_