

**Form of Undertaking for University Sports Team Member**

Personal data collected will be used for the purpose of the University Sports Team activities and in handling emergency/ special circumstances. The information collected on this Form may also be summarized/ aggregated/ de-personalized and, in this context, transferred internally within HKUST for research and analysis/ statistical purposes. The data collected will be handled with strict security and confidentiality and in compliance with the Personal Data (Privacy) Ordinance of Hong Kong.

I. Personal Particulars *Please delete where appropriate

Name: _____ (English, SURNAME in Block Letters) _____ (Chinese, if any)

Student ID no.: _____ Gender: Male / Female*

School: _____ Date of birth: _____

Year of study: UG/PG* 1/2/3/4/* HK ID / Passport* no.: _____

Student residence: Hall _____ Room _____ Status: Local / Non-local*

Contact tel. no.: _____ ITSC email: _____ @connect.ust.hk

Sports teams : 1. _____ 2. _____ 3. _____

Emergency Contact Person: _____ Emergency Contact no.: _____

II. Declaration**By signing this form, I declare that**

- I am physically fit for training and competition in _____ (please list all the sports that you have joined);
- I **have / have not*** participated in sports competitions organized by the University Sports Federation of Hong Kong, China (USFHK). Details of my participation history are:

Year	Institution Represented	Event(s) Participated

- The above-listed personal particulars are true in every respect and I fully understand that I participate in the activities at my own risk, whenever during the practice or contesting sessions;
- I understand that the university sports team uniforms are issued exclusively for members of the HKUST sports team. I agree to wear the team uniforms at recognized competitions and events representing the university. I also understand that I have to keep the team uniforms in good conditions and must return them to the Sports Development of Dean of Students' Office in case of withdrawal from the sports team(s) during the academic year.

Signature: _____ Date: _____

Signature of Team Manager: _____ Date: _____

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*For Office Use Only*

Form received on \_\_\_\_\_ by \_\_\_\_\_

Data checked and uploaded on \_\_\_\_\_ by \_\_\_\_\_