



**Student Affairs Office**  
Application for User Card  
for Use of Weight Training Equipment in Fitness Center

*Students, Staff/Faculty and their immediate family members and other approved users are eligible to apply for a User Card for Use of Weight Training Equipment in Fitness Center. Users have **special/urgent** needs may contact Facilities Management direct. Contact numbers are available on request at the Amenities Service Counter.*

I would like to apply for a User Card for use of Weight Training Equipment in Fitness Center. For your information, I have: (please ✓)

- attended Video Viewing Session on \_\_\_\_\_
- a) received courses/instructions \* on weight training at \_\_\_\_\_  
 # \_\_\_\_\_  
 \_\_\_\_\_ on \_\_\_\_\_ ; and  
 (Institution/Organization) (Date)
- b) \_\_\_\_\_ years experience in handling weight training equipment.

***I am confident that I can handle all weight training equipment in the HKUST Fitness Center. I further declare that I am physically fit for using the weight training equipment and I fully understand that I use the weight training equipment at my own risk, the University and Student Affairs Office will not hold any responsibility or liability whatsoever for any accident happened.***

Name of Applicant: \_\_\_\_\_ Sex: \_\_\_\_\_  
 (English) (Chinese)

UST Card No. \_\_\_\_\_ Passport/HKID\* No.: \_\_\_\_\_

Status:  Student  Staff  Staff Family  Sports Facilities User Card Holder  Others \_\_\_\_\_

Department: \_\_\_\_\_ Contact Tel: \_\_\_\_\_

E-mail: \_\_\_\_\_

- Note:*
1. Please complete and return this application to Amenities Service Counter, Student Affairs Office.
  2. Please submit a) ONE recent photograph (2.5 x 3 cm); and  
 b) ONE photocopy of university card;
  3. The applicant may be required to attend an interview/test.
  4. Child of eligible staff members between age of 18-21 pursuing full-time education course must produce documentary proof of student status and age information.<sup>#</sup>
- # please submit photocopy of relevant document.

\_\_\_\_\_  
 Signature of Applicant

\_\_\_\_\_  
 Date

\* Please delete as appropriate

<i>for Office Use Only</i>	
Application received by: _____ on _____	
Approved / Not Approved	Expiry Date _____
	Card Prepared & Sent on _____
	Data Input by _____
_____ Signature	_____ Date
	Data Input on _____