**The Hong Kong Girl Guides Association**

**Received Date (Office Use)**

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| **2019-2020 Give A Day Get A Disney Day** |
| **Individual Application Form** |
| Note: Ticket Result and Ticket Collection Details will only be posted on HKGGA website. |
| **Basic Information**  (\*Chinese Name and English Name must be same on the H.K.I.C) |
| Name: (Chinese)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | (English)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Unit Number: \_\_\_\_\_\_\_\_\_\_ IS / WK / EK / NT HBH / Pack / Coy / RGSU / Air Ranger / Sea Ranger / GG |
|  🞎 Guider 🞎 Commissioner 🞎 Trainer  Other (Please specify:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) |
| \* First time joining a volunteer work? Yes / No |
| H.K.I.C No:: |  |  |  |  |  |  | (**Only the letters and the first 5 digits**) (Application will be invalidated if data are not available.) |
| Email Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact Tel:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Please note the following information and fill in the selection** Each phase is available on a first-come-first-served basis. Unsuccessful applicants will not be automatically transferred to the next phase. Please resubmit your application form for the phase at the specified time. **Please select how to how to handle the unsuccessful application form:** 🞎 Destroy the form by staff 🞎 Collect the form back by your own (within 10 days after the deadline for submission of the application form) |
| **Declaration of the Applicant:** |
| 1. **This is my only registration under “2019/20 Give a Day. Get a Disney Day” Volunteer Programme and I will not enroll in the Programme through the same or other organizations again; otherwise, will be disqualified.**
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| 1. **I understand that the complimentary ticket(s) received by me is for my own accord. It shall not be disposed of for profit making purpose or used for commercial, political or religious propaganda purposes.**
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| 1. **I am willing to provide the information above to AVS for verifying the identification in this Volunteer Programme, and understood AVS complies with the Chapter 486 Personal Data (Privacy) Ordinance by the Law of Hong Kong.**
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| Signature of Applicant:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Volunteer Service Hours Information** (Applicant must complete 10 hours or more of volunteer service) |
| Service Project Name | Service Date | Hours |
| 1) |  |  |
| 2) |  |  |
| 3) |  |  |
| 4) |  |  |
| 5) |  |  |
| 6) |  |  |
| 7) |  |  |
| 8) |  |  |
|  | Total hours:  |
| **For Office Use Only** |  |
| Record Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| Acceptance of enrollment: 🞎 YES (File Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) 🞎 NO (Reason:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) |
| \* Please delete whichever inappropriate/ Please specify ☑ as appropriateReturn the completed Unit Application Form with Unit Censes Form by post.(Address: Room 604, 6/F, Oi Sin House, Oi Tung Estate, Shau Kei Wan, HK  |