

Application for Use of Facilities in Community Halls / Community Centre in Sai Kung District

(Note: Please put a "✓" in the appropriate box / *Delete as appropriate)

We would like to book:

- | | |
|--|--|
| <input type="checkbox"/> Hang Hau Community Hall | <input type="checkbox"/> Kin Choi Community Hall |
| <input type="checkbox"/> King Lam Neighbourhood Community Centre | <input type="checkbox"/> Lohas Park Community Hall |
| <input type="checkbox"/> Sai Kung Jockey Club Town Hall | <input type="checkbox"/> Sheung Tak Community Centre |
| <input type="checkbox"/> Tsui Lam Community Hall | |

1. Information of Applicant

Name : (English) _____
 (Chinese) _____

Registered address : _____

Tel. no. : _____ Fax no. : _____

Name of contact person : Mr/ Ms* _____
 (office hours): _____
 (non-office hours): _____

2. Information of Joint Organiser(s) / Co-organiser(s) (Please fill in if appropriate)

Name : (English) _____
 (Chinese) _____

Registered address : _____

Tel. no. : _____ Fax no. : _____

We hereby declare that we / and our joint organiser(s) / co-organiser(s)* belong to the following type(s) of organisation:

<u>Applicant</u>	<u>Joint Organiser / Co-organiser</u>	
<input type="checkbox"/>	<input type="checkbox"/>	1. Subvented welfare agencies
<input type="checkbox"/>	<input type="checkbox"/>	2. Subvented educational institutions, subvented schools or non-profit making schools
<input type="checkbox"/>	<input type="checkbox"/>	3. Offices of Legislative Councillors and District Council Members
<input type="checkbox"/>	<input type="checkbox"/>	4. Charitable organisations
<input type="checkbox"/>	<input type="checkbox"/>	5. Non-profit making organisations
<input type="checkbox"/>	<input type="checkbox"/>	6. Local committees recognised by the Government
<input type="checkbox"/>	<input type="checkbox"/>	7. Government Departments
<input type="checkbox"/>	<input type="checkbox"/>	8. Others

(If there is more than one joint organiser / co-organiser, please use a separate sheet to list out their type(s) of organisation as required above.)

3. Details of function to be held (Each application form should be used for application of one activity.)

Type of activity : Large-scale Class Other

Name : _____

Date : _____

Time : From _____ a.m./ noon/ p.m.* to _____ a.m./ noon/ p.m.*

Content : _____

Target group(s) : _____ Estimated no. of participants : _____

Charges to participants / audience* : Yes _____ dollars per person No

4. Application for charges exemption

Yes No

I understand that in applying for charges exemption, the applicant and the joint organiser / co-organiser (if any) should satisfy the conditions set down in the Guidelines on the Use of Facilities in Community Halls / Community Centre in Sai Kung District and should not make any profit out of the activity.

5. Facilities applied for

Note: Facilities available in each Community Hall/ Community Centre are varied, please contact us for details.

Venue	Air-Conditioning	Facility	
<input type="checkbox"/> Hall	<input type="checkbox"/>	<input type="checkbox"/> Stage Lighting	<input type="checkbox"/> Chair
		<input type="checkbox"/> PA System	<input type="checkbox"/> Folding Table
		<input type="checkbox"/> Projector	<input type="checkbox"/> Display Board
		<input type="checkbox"/> Wired Mic.	<input type="checkbox"/> Piano
		<input type="checkbox"/> Wireless Mic.	<input type="checkbox"/> Choral Riser
		<input type="checkbox"/> Microphone stand	<input type="checkbox"/> Table-tennis table
<input type="checkbox"/> Dressing rooms	<input type="checkbox"/>	<input type="checkbox"/> Male	<input type="checkbox"/> Female
<input type="checkbox"/> Conference room	<input type="checkbox"/>	<input type="checkbox"/> PA System	<input type="checkbox"/> Wired Mic.
		<input type="checkbox"/> Projector	
<input type="checkbox"/> Badminton court (except for STCH)	<input type="checkbox"/>	---	
<input type="checkbox"/> Others (Please specify):	---		

6. Declaration

I hereby certify that all the above information given by me is true and correct and that I have read and agreed to observe the conditions for using the above facilities as set out in the *Guidelines on the Use of Facilities in Community Halls / Community Centre in Sai Kung District*.

Official stamp of the Applicant _____ Signature : _____

Name : Mr/ Ms* _____

Position : _____

Date : _____

Submission of Application Form:

- 1) **By Mail / In Person** Sai Kung District Office, 6/F. Sai Kung Tseung Kwan O Government Complex, 38 Pui Shing Road, Tseung Kwan O (Tel.: 3740 5328)
- 2) **By Fax** Fax no.: 2812 6867
- 3) **By Email** Email Address : chcc_sk@had.gov.hk

Notes: For details of the *Guidelines on the Use of Facilities in Community Halls / Community Centre in Sai Kung District*, please refer to the following link: http://www.had.gov.hk/en/public_services/community_halls_centres/ccch.htm

Statement of Expected Income and Expenditure of Paid Activity
收費活動收支預算表

Name of activity:

活動名稱：

Date and Time of activity:

活動日期及時間：

Income 收入		Expenditure 支出		Remarks 備註
Item 項目	Amount 款項	Item 項目	Amount 款項	
1		1		
2		2		
3		3		
4		4		
5		5		
6		6		
7		7		
Total 總數(a): \$		Total 總數(b): \$		

Balance: Surplus / Deficit / Break-even*

(a)-(b)

活動結存: 盈餘 / 虧損 / 收支平衡*

\$

Remarks:

備註:

I hereby certify that the above information is true and correct.

本人證明上述資料真實無訛。

Official Chop of Applicant

申請機構正式印鑑

Signature :

簽署

Name : Mr./Ms*

姓名

先生 / 女士*

Position :

職位

Date :

日期

* Delete as appropriate 請刪去不適用者

To: Sai Kung District Office

Exemption of Charges for Use of Facilities in Community Hall/ Community Centre
Statement of Account

Section A : Basic Information

Name of Community Hall/ Community Centre: _____

Name of Activity: _____ Application Number _____

Facility Rented: Hall / Changing Room / Conference Room / Badminton Court / Others: _____

Applicant: _____

Date of Activity: _____

Period of Activity: _____ Number of participant: _____

Section B : Balance (up to _____)

(A)	Total Income (Details at Section C)	\$
(B)	Total Expenditure (Details at Section D)	\$
(C)	Balance [(B)-(A)]	\$

Section C : Details of Income

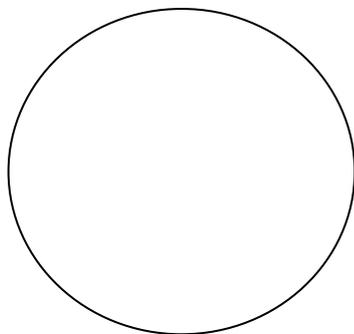
Items	Number/Quantity	Unit Rate (\$)	Total Amount (\$)
<i>e.g. 1 : Participants' fee</i>			
<i>e.g. 2 : Sponsorship by Company X</i>			
1.			
2.			
3.			
4.			
5.			
Total:			

Section D : Details of Expenditure

Items	Expenditure (\$)
1.	
2.	
3.	
4.	
5.	
Total :	

Section E : Declaration by Authorized Person of Applicant

1. I hereby declare that all the information given in the above sections are true and accurate. All incomes (including sponsorship and donation) have been fully listed in Section C.
2. Applicant and co-organizer(s)(if any)
 - have not made any profit from the activity.
 - have made profit from the activity and agree to pay the hiring charges to the Government.



Official Chop of
Applicant

Signature : _____
Name : _____
Post : _____
Name of Organization : _____
Date : _____

Remarks:

1. This statement of account is only applicable to fee-charging activity which has been exempted from charges for use of facilities in community hall/ community centre.
2. If a fee-charging activity has been exempted from charges, the applicant must submit a self-certified statement of account within one month after conclusion of the activity.
3. The applicant need not attach any receipts/supporting documents to the self-certified statement of account when it is first submitted. However, as the Sai Kung District Office will conduct random checks on statements of account of fee-charging activities which have been exempted from charges, the applicant must retain the receipts and supporting documents for the activity for two years. Production of such receipts and supporting documents for examination is required if the self-certified statement of account in respect of the activity is selected for random check.
4. The personal data provided in this form will be used for processing of applications for use of facilities in community halls/community centres. They may be disclosed to relevant parties for the same purpose. For correction of or access to personal data thus provided, please write to the Access to Information Officer, Sai Kung District Office, address: 6/F., Sai Kung Tseung Kwan O Government Complex, 38 Pui Shing Road, Tseung Kwan O

Notification for Cancellation of Booking

取消租用場地通知

We would like to cancel our booking of facilities in:

- Hang Hau Community Hall Kin Choi Community Hall
 King Lam Neighbourhood Community Centre Lohas Park Community Hall Sai Kung Jockey Club Town Hall
 Sheung Tak Community Hall Tsui Lam Community Hall Details are as follows:

本機構現致函取消租用：

- 坑口社區會堂 健彩社區會堂 景林鄰里社區中心 康城社區會堂
 西貢賽馬會大會堂 尚德社區會堂 翠林社區會堂 的申請，詳情如下：

1. Information of Applicant 申請機構資料

Name: (English)

名稱: (英文)

(Chinese)

(中文)

2. Details of function to be held 活動詳情

Name: (English)

名稱: (英文)

(Chinese)

(中文)

Date:

日期:

Time:

時間:

From _____ a.m./noon/p.m.* to _____ a.m./noon/p.m.*

由上 / 中 / 下午* _____ 時至上 / 中 / 下午* _____ 時

Application No.:

申請編號:

3. Facilities applied for 借用設備

- Hall Conference Room / Activity Room Dressing Room Badminton Court
 禮堂 會議室 / 活動室 化妝室 羽毛球場

4. Reason of Cancellation 取消原因

Official Chop of Applicant

申請機構正式印鑑

Signature :

簽署

Name : Mr./Ms.*

姓名

先生 / 女士*

Position :

職位

Date :

日期

(Note: Please put a "✓" in the appropriate box / *Delete as appropriate)

(註：請在適當的空格內填上「✓」號 / *請刪去不適用者)

Statement of Purpose

Purpose of Collection

1. The personal data provided by means of this form will be used by Home Affairs Department for the purpose of:

- (i) implementing district administration scheme;
- (ii) enhancing knowledge of the community concerning the policies and schemes of the Government, and to monitor their response towards those policies and schemes;
- (iii) promoting community involvement activities and encouraging participation in social affairs.

Classes of Transferees

2. The personal data you provide by means of this form may be disclosed to other Government bureaux, departments and other relevant persons and bodies for the purposes mentioned in paragraph 1 above.

Access to Personal Data

3. According to Sections 18 and 22 and Principle 6 in Schedule 1 of the Personal Data (Privacy) Ordinance, you have the right to access and correct your personal data. Your right to access includes the right to obtain a copy of the personal data you provided in this form.

Enquiries

4. Enquiries concerning the personal data collected by this form, including access to and correction of information, should be addressed to:

Senior Executive Officer (District Management)
Sai Kung District Office, Home Affairs Department
Address: 6/F, Sai Kung Tseung Kwan O Government Complex
38 Pui Shing Road, Tseung Kwan O
Tel: 3740 5333