

深圳市飞盘运动协会入会申请表

Shenzhen Flying Disc Association Membership Application Form



会员编号/ Membership No. : _____

姓名 Full Name			性别 Gender		
籍贯 Nationality			出生年月日 Date of Birth		
电话号码 Phone Number			电子邮箱 E-mail Address		
毕业院校 School Attended			政治面貌 (Chinese Only)		
紧急联系人电话 Emergency Contact Number			血型 Blood type		
身份证号码 Passport Number					
工作单位及职务 Company & Title					
现住址 Present Address					
飞盘运动项目 Sports Played: (circle)	极限飞盘 Ultimate	飞盘高尔夫 Disc Golf	躲避盘 Dodgebee	花式飞盘 Freestyle	其他 Other
飞盘经验/ Disc sports experience:					
申请人签字/Signature of the Applicant: 日期/Date:			秘书长签字/ Signature of the President: 日期/Date:		

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注：本资料仅用于深圳市飞盘运动协会备案，不做其他他用

Note: Any information you provide here will only be used by the Shenzhen Flying Disc Association, and not for any other purpose.

(请将本人身份证正反面复印件粘贴在此处)

Please paste a copy of your ID card here

(请正反面打印本表)

Please print this form double-sided.