



# 香港糖尿聯會健康長跑

個人報名表格  
Entry Form for  
Individual Runner

十一月  
11.JAN  
2009

Diabetes Hongkong Healthy Run 2009

主辦機構 Organizer  
香港糖尿聯會 Diabetes Hongkong

地點 Venue  
大埔吐露港緩跑徑 Tai Po Tolo Harbour Jogging Path

- 組別 Category
- 10公里跑 10km Run  
所有16歲或以上人士 All persons aged 16 and over  
(男子公開 Men's Open / 男子高級 Men's Senior  
女子公開 Women's Open / 女子高級 Women's Senior)
  - 5公里跑 5km Run  
只限16歲或以上香港糖尿聯會病友會員  
For DHK members with diabetes aged 16 and above only  
(男子公開 Men's Open / 女子公開 Women's Open)
  - 3x1公里校際接力 3x1km School Team Relay  
只限中學生 For secondary school students only  
(男子校際 Boy's School Team / 女子校際 Girl's School Team)

報到時間 Registration Time / 起跑時間 Starting Time  
早上七時三十分 07:30 / 早上八時三十分 08:30

集合地點 Assembly Area / 終點及頒獎地點 Finishing Point  
元洲仔公園(吐露港單車徑末端)  
Yuen Chau Tsui Park (end of Tolo Harbour Cycling Track)

- 獎項 Awards (前五名 Top 5)
- 5公里及10公里跑 5km & 10km Run  
禮券及獎盃乙座 Gift and Trophy
  - 3x1公里校際接力 3x1km School Team Relay  
禮券、個人獎牌及獎盃乙座 Gifts Vouchers, Medals and Trophy  
(以上獎品由周大福贊助 The above prizes are sponsored by Chow Tai Fook)

紀念品 Souvenir  
所有參加者將獲贈快乾功能運動背心、護腕錶、毛巾及腳跟龜裂膏乙件。  
Functional dry-fit vest, wristband watch, towel and cracked heel cream.

- 報名費 Entry Fee
- 5公里/10公里跑每位港幣80元正  
HK\$80 per runner for 5km and 10km Run
  - 校際接力每隊(3人)港幣180元正  
HK\$180 per team of 3 runners for 3x1km school team relay  
(名額有限，先到先得 Limited quota, first-come-first-served)

郵寄報名截止日期及查詢 Deadline for registration by mail & Inquiries  
2008年12月31日(星期三) 31 December 2008 (Wednesday)  
電話 Tel : 2723 2087 傳真 Fax : 2723 2207  
網址 Website : www.diabetes-hk.org

## 贊助機構 Sponsors:



## 特別鳴謝 Acknowledgement:

- 籌募委員會成員，包括：  
Members of the Organizing Committee, including:-  
梁彥欣醫生(主席) Dr. Jenny Leung (Chairperson)  
陳麗婷營養師 Ms. Tina Chan  
鍾振海醫生 Dr. Chung Chun Hoi  
曾文和醫生 Dr. Tsang Man Wo
- 同心薈萃義工隊 Daybreak Volunteers
- 香港物理治療學會 Hong Kong Physiotherapy Association Limited
- 香港聖約翰救傷隊 Hong Kong St. John Ambulance
- 康樂及文化事務署 Leisure and Cultural Services Department

## 對象 Target

3x1公里校際接力 - 中學生  
10公里賽事 - 所有16歲或以上人士  
5公里賽事 - 只限香港糖尿聯會病友會員  
3x1km School Team Relay - Students from Secondary School  
10km Run - All persons aged 16 and over  
5km Run - For DHK members with diabetes

## 賽事目的 Objectives

長跑既可消耗卡路里幫助減肥，也可改善血糖、血脂及血壓的控制。為了鼓勵大眾(特別是糖尿病友及糖尿病高危人士)多做運動，香港糖尿聯會舉辦健康長跑，其目的是：

(1) 為了宣揚定期參與體能運動對健康及預防糖尿病的重要；  
(2) 給參加者挑戰自我、克服壓力的機會；(3) 讓糖尿專家及病患者互助並分享經驗。

Distance running does not only burn off calories for weight reduction and achieving fitness, it also improves blood sugar, lipid and blood pressure control. The Run aims at:

(1) educating the public about the importance of regular exercise for good health, particularly diabetes prevention;  
(2) providing an opportunity for runners to work out their self-challenging power and stress; and (3) providing a social occasion for diabetic professionals and patients to share experience and support.

## 報名費 Entry Fee

5公里或10公里跑每位跑手80港元  
3x1公里校際接力每隊180港元  
5km or 10km Run HK\$80 per runner  
3x1km School Team Relay HK\$180 per Team

## 號碼布 Number Cloth

號碼布需扣在胸前當眼處，以便工作人員辨認，否則大會有關取消運動員之比賽資格。號碼布不得轉讓，如有代跑者，除取消比賽資格外，大會亦保留拒絕其參加大會日後比賽的權利。

Runners should wear their number cloths in front of their chests, so the officials can identify their numbers easily; otherwise, the Organizer reserves the right to disqualify their results. Number cloths are non-transferable. In case of any dishonest behavior, runners will be disqualified and the Organizer reserves the right to reject their applications for other events held by the Organizer.

## 行李擺放區 Baggage Area

集合點將設行李擺放區，大會建議運動員不要攜帶貴重物品到場，如有個人財物遺失，大會概不負責。如運動員需要行李袋，可於比賽當日向行李區之工作人員索取。

A Baggage Storage Area will be provided, however, runners are advised not to bring any valuable item on the day. The Organizer will not be responsible for any loss of personal property. Plastic baggage bags will be provided at baggage area upon request.

## 時限 Time Limit

5公里賽事 5km Run：1.5小時hours  
10公里賽事 10km Run：2小時hours  
終點及賽道設施將於比賽時限後關閉。

The race course and the finish facilities will be closed after the time limit.

## 證書 Certificate

上述時限內完成之跑手將獲發證書乙張。  
Certificates will be issued to runners completed within the time limit.

## 水站 Water Station

起點開始約3.5公里設有水站。

## 保險 Insurance

大會將為賽事購買第三者保險，參加者之個人意外保險須自行負責。

The Organizer will cover Public Liability Insurance only. Runners should be responsible for their own Personal Accident Insurance.

## 惡劣天氣 Cancellation Policy

- (a) 如早上六時懸掛紅色暴雨、黑色暴雨或3號風球或以上，賽事將會取消。  
If Red /Black Rainstorm or Typhoon Signal No.3 or above is hoisted at 6:00am, the race will be cancelled.
- (b) 賽事日緊急查詢電話，服務時間為早上5至10時：9532-3925  
Race day emergency contact number during 5 am - 10 am : 9532-3925
- (c) 如賽事取消，報名費將獲全數退回。  
If the race is cancelled, full entry fee will be refunded.

## 上訴 Protest

上訴須於成績公報後30分鐘內，以書面連同港幣100元手續費遞交大會，如上訴得直，手續費可獲發還。

Any protest must be made in writing within 30 minutes after the announcement of the result, and accompanied with a deposit of HK\$100. Relevant fee will be refunded if the protest is upheld.

## 其他事項 Others

- 由於賽事採用人手計時，大會最終可能未能為所有跑手紀錄成績，敬請見諒。  
All records will be hand-timed and full timing records may not be available for every runner.
- 參賽者須穿著上衣作賽。  
Runners must wear tops during the event.



## 體能活動就緒問卷 Physical Activity Readiness Questionnaire (PAR-Q)

對多數人來說，體能活動應該不會構成問題或危機。以下體能活動就緒問卷(PAR-Q)，就是為一些小數不適宜作體能活動或是需經醫生建議最適合的活動的成人而設。

請細閱以下問題，然後誠實回答「是」或「否」。

For most people, physical activity should not pose any problem or hazard. PAR-Q has been designed to identify the small number of adults for whom physical activity might be inappropriate or those who should have medical advice concerning the type of activity most suitable for them.

Common sense is your best guide in answering these few questions. Please read them carefully and check YES or NO opposite the question if it applies to you.

- | 是<br>YES              | 否<br>NO               |    |   |
|-----------------------|-----------------------|----|---|
| <input type="radio"/> | <input type="radio"/> | 1. | 你的醫生曾否說你有心臟毛病?<br>Has your doctor ever said you have heart trouble?   |
| <input type="radio"/> | <input type="radio"/> | 2. | 你是否經常心痛及胸痛?<br>Do you frequently have pains in your heart and chest?  |
| <input type="radio"/> | <input type="radio"/> | 3. | 你是否經常感覺暈眩或有短暫性的嚴重頭昏眼花?<br>Do you often feel faint or have spells of severe dizziness?   |
| <input type="radio"/> | <input type="radio"/> | 4. | 曾否有醫生說你的血壓過高?<br>Has a doctor ever said your blood pressure was too high?   |
| <input type="radio"/> | <input type="radio"/> | 5. | 曾否有醫生說你因運動而形成或加重了骨頭或關節的毛病?<br>Has your doctor ever told you that you have a bone or joint problem(s), such as arthritis that has been aggravated by exercise, or might be made worse with exercise? |
| <input type="radio"/> | <input type="radio"/> | 6. | 除上述外，還有別的體能原因令你不能參加想參與的體能活動?<br>Is there a good physical reason, not mentioned here, why you should not follow an activity programme even if you wanted to?   |
| <input type="radio"/> | <input type="radio"/> | 7. | 你是否年過六十五及不習慣劇烈運動?<br>Are you over age 65 and not accustomed to vigorous exercise?   |

答案如有一個或超過一個「是」：  
在增加體能活動或測試體能前，請諮詢你的家庭醫生。

如答案全屬「否」：  
如你是準確地回答這問卷便相當程度的保證，你現時是適合做運動。

### If you answered YES to one or more questions ...

If you have not recently done so, consult with your personal physician by telephone or in person before increasing your physical activity and/or taking a fitness test.

### If you answered NO to all questions ...

If you answered PAR-Q accurately, you have reasonable assurance of your present suitability for exercise.

資料來源 Source:

Stairway to Health Programme, Public Health Agency of Canada,  
(譯自加拿大公共衛生處) <http://www.phac-aspc.gc.ca/sth-evs/english/parq.htm>



# 香港糖尿聯會健康長跑2009 Diabetes Hongkong Healthy Run 2009 個人報名表格 Entry Form for Individual Runner

號碼 Run Number  
大會專用 For office use

\* 為方便電腦處理，請用英文正楷大寫清楚填寫。  
\* Please complete the form clearly in BLOCK LETTERS.

先生 Mr       女士 Ms

英文姓名 Name in English \_\_\_\_\_

中文姓名 Name in Chinese \_\_\_\_\_

聯絡地址 Address \_\_\_\_\_

聯絡電話 Contact Tel \_\_\_\_\_

電郵 E-mail \_\_\_\_\_

出生日期 Date of Birth \_\_\_\_\_年/Y \_\_\_\_\_月/M \_\_\_\_\_日/D

比賽當日年齡 Age on Run Day \_\_\_\_\_

## 組別 Categories

- 10公里跑 10km Run (名額 Quota : 800)**
  - 男子公開組 (16 - 38歲) Men's Open (aged 16 - 38)
  - 男子高級組 (39歲或以上) Men's Senior (aged 39 and above)
  - 女子公開組 (16 - 38歲) Women's Open (aged 16 - 38)
  - 女子高級組 (39歲或以上) Women's Senior (aged 39 and above)
- 5公里跑 5km Run (名額 Quota : 100)**

只限香港糖尿聯會病友會員 For DHK members with diabetes only

  - 男子公開組 (16歲或以上) Men's Open (aged 16 and above)
  - 女子公開組 (16歲或以上) Women's Open (aged 16 and above)

會員編號 Membership No. \_\_\_\_\_
- 3x1公里校際接力 3x1km School Team Relay**

學校名稱 School Name \_\_\_\_\_

(請同時填寫「3x1公里校際接力」報名表格  
Please fill in "Entry Form for 3x1km School Team Relay" as well)

備註 Remarks

  - 報名表可以自行影印。傳真及電郵報名概不受理。  
Photocopies of the entry form are acceptable. Faxed and e-mailed entries will not be processed.
  - 大會保留更改以上資料之權利。  
The Organizer reserves the rights to amend the above information.

★敬請**必須**填寫以下聯絡資料，以作緊急之用  
For Emergency Use Only on Race Day (You MUST fill in)

號碼 Run No. \_\_\_\_\_

聯絡人姓名 Name of Contact Person \_\_\_\_\_

聯絡人電話 Contact No. \_\_\_\_\_

請列出有關個人醫療關注事項，如糖尿病人、現正服食之藥物、敏感藥物或患有聾啞症等。  
Please indicate below clearly any information which may be essential in a medical emergency, e.g. person with diabetes, medication currently being taken, allergies, deafness, etc.

\_\_\_\_\_

\_\_\_\_\_

請填妥以下之地址標貼：  
Please fill in the following address label:

姓名 Name \_\_\_\_\_ 號碼 No. \_\_\_\_\_

地址 Address \_\_\_\_\_

大會專用 For office use

## 豁免法律責任及聲明

謹證明本人體格健全及有能力參與比賽，並願意自行承擔所有責任。本人亦同意遵守由香港糖尿聯會(大會)所訂之一切比賽規則及決定。本人一旦因往返比賽場地或比賽中受到任何財物損失、受傷或導致死亡，大會、各贊助商及其他有關合辦機構均無需負上任何責任。本人授權大會及傳媒在無需經本人審查，而可永久使用本人的肖像、姓名、聲線及個人資料，作為活動籌辦及推廣之用。

## Waiver of Liability and Declaration

I confirm that I am physically fit and capable of participating in the Run and I am entering the Run at my risk and responsibility. I hereby agree to abide by all rules and conditions laid down by Diabetes Hongkong (DHK). I discharge DHK, the sponsors and any other individuals or organizations connected directly or indirectly with the Run from any responsibility in the event of an accident or mishap which may cause me injury, death, or loss of property during, as a consequence of or while traveling to or from the Run. I grant permission and assign all rights, title and interest to DHK, and all media throughout the world to utilize my appearance, name, voice, bio-data and like in connection with the Run in perpetuity and agree to waive any right of inspection or approval associated therewith.

跑手簽署 Runner's Signature \_\_\_\_\_

家長 / 監護人簽署  
Parents' / Guardian's Signature \_\_\_\_\_  
(18歲以下跑手適用 For runners aged under 18)

日期 Date \_\_\_\_\_

## 報名辦法 Registration

請郵寄下列資料到香港德輔道中244-252號東協商業大廈18樓1802室香港糖尿聯會：

Please mail the following to Diabetes Hongkong, Unit 1802, 18/F, Tung Hip Commercial Building, 244-252 Des Voeux Road Central, Hong Kong:

- 填妥並已簽署之報名表  
A duly completed and signed entry form.
- 貼有**1.4港元**郵票的回郵信封  
A **HK\$1.4** stamped self-addressed envelope.
- 銀碼80港元的 / 180港元劃線支票，抬頭寫「香港糖尿聯會」(背面請寫上參加者姓名)  
A crossed cheque of HK\$80 / HK\$180 payable to "Diabetes Hongkong"(please write down runner's name at the back of the cheque)

報名一經接納，報名費恕不發還及轉讓。

Entry fee is non-refundable and non-transferable once the entry is accepted.

**郵寄報名截止日期 Deadline for registration by mail**  
2008年12月31日(星期三) 31 December 2008 (Wednesday)

## 查詢 Enquiry



香港糖尿聯會  
Diabetes Hongkong

地址：香港德輔道中244-252號東協商業大廈18樓1802室  
Address: Unit 1802, 18/F, Tung Hip Commercial Bldg.,  
244-252 Des Voeux Road Central, Hong Kong.

電話 Tel: 2723 2087 傳真 Fax: 2723 2207

網址 Website: www.diabetes-hk.org

電郵地址 Email: info@diabetes-hk.org

根據個人資料(私隱)條例，以上資料只會作為發收據及募捐用途。若閣下不希望收取香港糖尿聯會之任何信件，請來函通知。

In accordance with the Personal Data (Privacy) Ordinance, the above information will be used for receipting and fundraising purposes only. Please notify us in writing if you do not wish to receive future mailings from Diabetes Hongkong



香港糖尿聯會 Diabetes Hongkong  
健康長跑 2009 Healthy Run 2009

**3x1 公里校際接力報名表格 Entry Form for 3x1km School Team Relay**

\* 每位隊員請同時填寫一份「個人報名表格」

Every team member must fill in an "Entry Form for Individual Runner" as well

郵寄報名截止日期 **Deadline for registration by mail:** 2008年12月31日 (星期三) Wednesday, 31 December 2008

報名辦法 **Registration:** 請將本報名表格，連同「個人報名表格」及報名費 (每隊港幣180元) 遞交香港糖尿聯會

Please return this form together with:- a) completed "Entry Form for Individual Runner"; and  
b) entry fee (HK\$180 per team) to Diabetes Hongkong

地址 **Address :**

香港德輔道中244號東協商業大廈18樓1802室「香港糖尿聯會」

Diabetes Hongkong, Unit 1802, 18/F., Tung Hip Commercial Building, 244 Des Voeux Road Central, Hong Kong.

如有任何疑問，請致電 2723-2087向本會職員查詢 For enquiry, please contact us at 2723-2087

中學學校名稱 **Secondary School Name**

\*請刪去不適用者 Please delete as appropriate

中文 **in Chinese** \_\_\_\_\_ 英文 **in English** \_\_\_\_\_

地址 **Address** \_\_\_\_\_

負責老師姓名 **Name of Teacher in-charge (\*先生Mr /女士Ms)** 中文 **in Chinese** \_\_\_\_\_

英文 **in English** \_\_\_\_\_ 電郵 **Email** \_\_\_\_\_

姓 Surname

名 Given names

聯絡電話 **Contact No.** \_\_\_\_\_ 手提 **Mobile** \_\_\_\_\_ 傳真 **Fax** \_\_\_\_\_

隊名 **Team name** \_\_\_\_\_

最多8個中文字 / 20個英文字母 No more than 8 Chinese characters / 20 letters

組別 **Category**       男子 Boy       女子 Girl

隊員姓名 (正楷填寫) Name of Team Members (in CAPITAL)		
	中文 in Chinese	英文 in English
1		
2		
3		

學校蓋章 School Stamp
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**比賽規則 Rules**

只限男女子各 12 隊參與賽事，額滿即止。

Only 12 Boys' and 12 Girls' team will be accepted on first-come-first served basis.

每隊之 3 位隊員必須就讀同一院校。

Each Team shall consist of 3 students attending the same school.

各院校在各組別的參賽隊數不得多於 3 隊。

Each school is allowed to have no more than three teams in each category.

如不足六隊參與接力賽事，大會將只設冠、亞、季軍；如不足三隊，則只設冠軍獎項。

If there are less than 6 entries, prizes will be awarded to the top 3 teams only.

If there are less than 3 entries, only the champion will be awarded.

如有需要，請自行影印本表格 Please copy this form for more entries