



香港復康會
The Hong Kong Society
for Rehabilitation



Two-Day Course in Hydrotherapy for Common Back and Knee Conditions Course Enrollment Form

Personal Details			
Name (Chinese)		Name (English)	
Gender	M / F		
Tel (Mobile)		Tel (Emergency)	
Corresponding Address			
Email Address			
Payment Details	Course Fee \$1,600		
Cheque no			
Cheque Payable to: The Hong Kong Society For Rehabilitation			
Mailing Address	Ms Chow Chi Ying The Centre on Health and Wellness Rm 15, G/F, 7 Rehab Path, Lam Tin, KLN.		
Enquiry	Ms Chow Chi Ying Tel: 2534-3533 Email: chiying.chow@rehab society.org.hk		
CPD Points	Pending		
Deadline	Please return this enrollment form and consent form with a crossed cheque to the above mailing address on or before 20/09/ 2019		
Course Cancellation and Refund Policy			
Fee paid is non-refundable after payment is processed. Under bad weather condition: typhoon signal No. 8 or above and black rain storm, the following arrangements will apply: If Typhoon Signal No.8 and/or Black Rainstorm Signal is in force 2 hours before the course, the course will be cancelled. HKSR will arrange the make-up course dates and notify the applicants within 2 weeks of the original course date. For applicants who are not available to attend the make-up course, HKSR will refund the full course fee. When Typhoon Signal No.8 or above is hoisted, classes immediately suspend. Fee paid is non-refundable in this situation.			



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Two-Day Course in Hydrotherapy for Back and Knee Condition Consent Form

I.....confirm that I do not have any of the following contraindication(s) for hydrotherapy:

- Cardiovascular instability
- Epilepsy
- Pregnancy
- Chlorine allergy

Legal Claim Waiver Consent (Please sign it and mail with your application). In consideration of The Centre on Health & Wellness accepting my application to this course, I hereby agree to waive all my claims (howsoever accrued) against The Centre on Health & Wellness, The Hong Kong Society for Rehabilitation.

Signature: _____

Full name (Please print): _____

Date: _____

Please tell us about your hydrotherapy experience:

1. Where is your workplace?

☐ HA ☐ Private ☐ NGO ☐ Others, pls specify _____

2. Years of experience in hydrotherapy?

☐ Never ☐ 1-2 years ☐ 3-5 years ☐ More than 5 years

3. Have you taken any post-graduate hydrotherapy related course?

4. What are you hoping to gain from the course?