The 2nd City I&T Grand Challenge

第二屆《城市創科大挑戰》

School Group Consent Form for Participants under 18 years old

中小學組 18 歲以下參賽者同意書

Teacher/ Parent/ Guardian^ Representative

老師/父母/法定監護人代表 lacksquare , (Teacher/ Parent/ Guardian^) representative of the following Participant(s), hereby give my consent for the Participant(s) to participate in the City I&T Grand Challenge. 市創科大挑戰》。 I, the Teacher/Parent/Guardian^, received the consent and agreement from both the participant(s) and their related teacher(s)/parent(s)/guardian(s) as the main contact and administrator for the City I&T Grand Challenge related matter. 本人作為老師/家長/監護人个,已收到參賽者及其相關的老師/家長/監護人的同意和授權,作為 《城市創科大挑戰》相關事宜的主要聯絡人和管理者。 I, the Teacher/Parent/Guardian^, understand and agree that except for personal information that is marked as "required" in any submission forms, all other submitted materials and information must not include any information that could be used to identify any individual, school, institution, or organization and that any violation by me/us in this respect may result in the immediate disqualification from the City **I&T** Grand Challenge. 本人作為老師/家長/監護人^,明白及同意,除任何提交表格中標示為「必須填寫」的個人信息 外,所有其他提交材料和信息不得包含任何可識別個人、學校、機構或組織的信息。若我/我們有

I, the Teacher/Parent/Guardian^, have read and agreed to the Terms and Conditions of the City I&T Grand Challenge, including its Privacy Policy and its Personal Information Collection Statement, at www.citytechgc.hk/en/terms-and-conditions/

任何違規行為,都可能導致被立即取消參與《城市創科大挑戰》的資格。

本人作為老師/家長/監護人[^], 已閱讀並明白及同意有關**《城市創科大挑戰》的條款及細則、私隱政策和個人信息收集聲明**, 請參閱 www.citytechgc.hk/zh-hk/terms-and-conditions/

I, the Teacher/Parent/Guardian^, hereby confirm that the following Participant(s) have consented to the content of the Final Submission.							
本人作為老師/家長/監護人^,在此確認以下參賽者已同意最終提交參賽的內容。							
^Please delete as appro	priate						
^請刪除不適用者							
Participant(s) informati	ion 參賽者資料						
(Note: Name should be	the same as it appears o	on your passport or proof of	identity document)				
(提示: 姓名需按護院	照或身份證明文件上編	顯示填寫)					
First Name *	Last Name*	Age*	Email*				
名字*	姓氏*	年齡*	電郵地址 *				
Signature 簽署							
Date 日期							

Details of the above Signatory

以上簽署人的詳細資料

First Name* (as it appears on your passport or proof of identity document)		
名字* (按護照或身份證明文件上顯示)		
Last Name* (as it appears on your passport or proof of identity document)		
姓氏* (按護照或身份證明文件上顯示)		
Email*		
電郵地址*		
Phone Number*		
電話號碼*		
Name of Institution/ School		
機構/學校名稱		

^{*}Required 必須填寫

OTHER Teacher/ Parent/ Guardian^ 老師/父母/法定監護人^

(Only use if the Representative can NOT represent all the participant(s))

(只限代表無法代表所有參賽者時使用)

I,, (Teacher/ Parent/ Guardian^) of the following Participant(s), hereby give my consent for the Participant(s) to participate in the City I&T Grand Challenge.
本人
I, hereby authorise
I, the Teacher/Parent/Guardian^, understand and agree that except for personal information that is marked as "required" in any submission forms, all other submitted materials and information must not include any information that could be used to identify any individual, school, institution, or organization and that any violation by me/us in this respect may result in the immediate disqualification from the City I&T Grand Challenge
本人作為老師/家長/監護人^,明白及同意,除任何提交表格中標示為「必須填寫」的個人信息外,所有其他提交材料和信息不得包含任何可識別個人、學校、機構或組織的信息。若我/我們有任何違規行為,都可能導致被立即取消參與《城市創科大挑戰》的資格。
I, the Teacher/Parent/Guardian^, have read and agreed to the Terms and Conditions of the City I&T Grand Challenge, including its Privacy Policy and its Personal Information Collection Statement, at www.citytechgc.hk/en/terms-and-conditions/
本人作為老師/家長/監護人^,已閱讀並明白及同意有關 《城市創科大挑戰》的條款及細則、私隱政策和個人信息收集聲明 ,請參閱 www.citytechgc.hk/zh-hk/terms-and-conditions/
I, the Teacher/Parent/Guardian^, hereby confirm that the following Participant(s) have consented to the content of the Final Submission.
本人作為老師/家長/監護人个,在此確認以下參賽者已同意最終提交參賽的內容。
^Please delete as appropriate
^請刪除不適用者

Participant(s) information 參賽者資料

(Note: Name should be the same as it appears on your passport or proof of identity document)

(提示: 姓名需按護照或身份證明文件上顯示填寫)

First Name*	Last Name*	Age*	Email*
名字*	姓氏*	年齡*	電郵地址*

Signature 簽署		
 Date 日期		

Details of the above Signatory

以上簽署人的詳細資料

First Name* (as it appears on your passport or proof of identity document)		
名字*(按護照或身份證明文件上顯示)		
Last Name* (as it appears on your passport or proof of identity document)		
姓氏* (按護照或身份證明文件上顯示)		
Email*		
電郵地址*		
Phone Number*		
電話號碼*		
Name of Institution/ School		
機構/學校名稱		

^{*}Required 必須填寫