

The 5th Hong Kong Transplant and Dialysis Games

(Form 4) Application Form For Unit Teams (Double) & Team Events

Hospital: _____ Person in charge: _____ Tel: _____

* Please add if there is more than one team.

Events		Name	Age	Sex	Remarks	
* Transplant patients (TP) /Dialysis patients (DP) /Healthcare+Patient (HP) double & mixed double (Mixed D)						
Bowling	* TP/DP/HP	* Double/ Mixed D	1.		M / F	
			2.		M / F	
Table Tennis	* TP/DP/HP	* Double/ Mixed D	1.		M / F	
			2.		M / F	
Badminton	* TP/DP/HP	* Double/ Mixed D	1.		M / F	
			2.		M / F	
Petanque	* TP/DP/HP	Double	1.		M / F	
			2.		M / F	
Transplant patients (TP) /Dialysis patients (DP)						
Swimming	* TP/ HD patient	4 x 50m	1.		M / F	Each team must be in 2 M 2 F
			2.		M / F	
			3.		M / F	
			4.		M / F	
		4x50m (Backup)	5.		M / F	
Transplant patients (TP)						
Running	TP	4x100m Relay	1.		M / F	Each team must be in 2 M 2 F
			2.		M / F	
			3.		M / F	
			4.		M / F	
		4x100m Relay (Backup)	5.		M / F	
Dialysis patients (DP)						
Racewalk	DP	2x60m Head2Head Relay	1.		M / F	Each team must be in 1 M 1 F
			2.		M / F	
		4x100m Relay	1.		M / F	Each team must be in 2M 2 F
			2.		M / F	
			3.		M / F	
			4.		M / F	
		4x100m Relay (Backup)	5.		M / F	

Events		Name	Age	Sex	Remarks	
* Living Donor (LD) & Living Recipient (LR)						
Running	LD & LR	2x25m Head2Head Relay	1.		M / F	One of the members must be age <5
			2.		M / F	
Racewalk	LD & LR	2x60m Head2Head Relay	1.		M / F	
			2.		M / F	
Healthcare+Patient Relay						
Running	Healthcare+ Patients	4x100m Relay	1.		M / F	At least 1 healthcare & 1 female.
			2.		M / F	
			3.		M / F	
			4.		M / F	
		4x100m Relay (Backup)	5.		M / F	
Unit Teams						
Running	Healthcare	4x100m Relay	1.		M / F	Each team must be in 2 males & 2 females
			2.		M / F	
			3.		M / F	
			4.		M / F	
		4x100m Relay (Backup)	5.		M / F	
Cheer-leading		Person IC			Tel	
Gate Ball	Names of team members:					
					(Backup)	
					(Backup)	