



漁農自然護理署
Agriculture, Fisheries and Conservation Department
「做個盡責任的寵物主人」講座預約表格
'Be a Responsible Pet Owner' Seminar Booking Form

請將填妥的表格傳真到 3101 9433。如有任何查詢，請致電 2729 6215與漁農自然護理署(漁護署)聯絡。
Please complete this form and fax it to 3101 9433. For enquiries, please contact Agriculture, Fisheries and Conservation Department (AFCD) at 2729 6215.

甲部 Part A 學校資料 Details of School

學校名稱 School Name: _____
學校地址 School Address: _____ 地區 District: _____
負責老師姓名 Name of Teacher-in-charge: _____
辦公電話 Office Tel. No.: _____ 傳真 Fax: _____
電郵地址 Email Address: _____

乙部 Part B 講座申請詳情 Details of Seminar Application

*請在適當的方格內加入剔號 Please tick the appropriate box(es)

可提供講座的時段 Available Seminar Time Period

上午十時至中午十二時 10am to 12 noon

下午二時三十分至五時 2:30pm to 5pm

(星期六、日及公眾假期除外 Except Saturdays, Sundays and Public Holidays)

擬申請講座日期及時間 Seminar Date and Time

2023 / 2024 (年/Year) _____ (月/Month) _____ (日/Day)

建議講座時間 Proposed Seminar Time: _____

(請從上述兩個時段內選擇建議講座時間，講座所需時間視乎所選主題)

Please propose a time within the above two seminar time periods and the duration of the seminar will depend on the topic(s) chosen

講座主題 Seminar Topic

(可選多於一個主題 Can choose more than one topic)

講座主題 Topic	時間(分鐘) Time (minutes)	幼稚園 Kindergarten	小學 Primary School	中學 Secondary School
<input type="checkbox"/> (1) 做個盡責任的寵物主人 Be a Responsible Pet Owner	40		✓	✓
<input type="checkbox"/> (2) 怎樣與寵物相處? How to interact with pets?	10		✓	✓
<input type="checkbox"/> (3) 為何人們棄養寵物? Why do people give up their pets?	15		✓	✓
<input type="checkbox"/> (4) 寵物與我們很相似 Pets are like us	20		✓	✓
<input type="checkbox"/> (5) 檢疫偵緝犬示範 (須視乎情況而定) Quarantine Detector Dogs (QDDs) demonstration (subject to availability)	15	✓	✓	✓
<input type="checkbox"/> (6) 為何領養而不購買寵物? Why adopt instead of buying a pet?	30			✓
<input type="checkbox"/> (7) ABCD 愛護動物你要知 ABCD Animals and Me	35	✓		

電腦系統設定 Computer System Setting: Windows / Mac

學校可提供免費車位給本署使用 Free parking space(s) provided by the school for our use: 0 / 1 / 2

語言 Language: 廣東話 Cantonese / 英文 English 班別 Grade: _____

地點 Venue: _____

預計參加人數 Anticipated Number of Participants: _____ 人/people

聲明 Declaration

本人已閱讀及明白下列守則。

I have read and understood the rules below.

- 由於是次講座是由漁護署**免費**提供的，請勿向參加者收取任何費用。
As the seminar is provided **free of charge**, please do NOT charge participants any fees.
- 漁護署會以**先到先得**的準則安排講座。
AFCD will arrange the seminar on a **first come, first served** basis.
- 如有需要，舉辦講座的日期及時間可能會有所更改。
If necessary, the date and time of the seminar might be changed.
- 如有任何更改，漁護署會與申請人聯絡及確認。
If there are any changes, AFCD will contact the applicant and confirm with him / her.
- 講座的日期及時間必須經漁護署確認。
The date and time of the seminar must be confirmed by AFCD.
- 講座所需時間視乎所選的主題。
The duration of the seminar will depend on the topics chosen.
- 講座以播放投影片及短片形式進行。
The seminar will be conducted in the form of a PowerPoint Presentation and display of videos.
- 若學校准許漁護署攜帶狗隻作示範表演，漁護署會盡量安排 **(須視乎情況而定)**。
If the school allows, AFCD will try to bring a dog to the seminar for demonstration **(subject to availability)**.
- 請學校提供兩個泊車位、兩支無線咪、能播放投影片及短片的電腦、投影機、屏幕、音響系統及一張枱作講座之用。
Please provide two parking spaces, two wireless microphones, a computer that can show PowerPoint and videos, a projector, a screen, sound system and a table for the seminar.

個人資料收集聲明

Personal Information Collection Statement

- 申請人所提供的資料將用作漁護署舉辦教育講座事宜。申請人提供個人資料純屬自願性質，但若沒有提供資料，我們可能將無法處理預約。
The information provided by the applicant will be used for purposes related to the organisation of educational seminar by AFCD. The provision of personal data is voluntary but we may not be able to process the booking if the information is not provided.
- 根據《個人資料(私隱)條例》，申請人有權查閱和更正本預約表格內的個人資料。
Under the Personal Data (Privacy) Ordinance, the applicant has the right of access and correction with respect to the personal data on this Seminar Booking Form.
- 查閱和更正本預約表格內個人資料的要求應以書面形式向漁農自然護理署動物管理(發展)科提出，其地址為九龍長沙灣道二零三號長沙灣政府合署五樓。
Request for access and correction of personal data on this Seminar Booking Form should be addressed in writing to Animal Management (Development) Division of Agriculture, Fisheries & Conservation Department, whose address is 5/F, Cheung Sha Wan Government Offices, 303 Cheung Sha Wan Road, Kowloon, Hong Kong.

負責老師簽署

Signature of Teacher in-charge: _____

負責老師姓名

Name of Teacher in-charge: _____

學校蓋章

School Stamp: _____

日期

Date: _____