

義工登記表 – Volunteer Registration Form

請以正楷填寫，並在適用項目填上✓號
 (Please fill in the form using BLOCK letters and put a tick where appropriate.)

此部分由職員填寫 By Staff

義工編號：_____

會員編號：_____

輸入資料日期：_____

個人資料 Personal Information

姓名 Name	(中文) Chinese	(英文) English	性別 Gender	男/女 Male/ Female
出生月份 (月/年) Date of Month (MM/YYYY)	身份證號碼 ID Number		(英文字母及首四個數字) (Letter and the first 4 digits)	
地址 Address	電郵 Email			
電話* Tel. No.*	(住宅) Home	(手提) Mobile	<input type="checkbox"/> 本人同意中心以 WhatsApp 向我發佈有關資訊。 I agree the centre to contact me via WhatsApp.	

緊急聯絡人 Contact Person in Case of Emergency

姓名 Name	與義工關係 Relationship with Volunteer	電話 Tel. No.
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教育程度 Education Level

<input type="checkbox"/>	小學程度以下 Below Primary School	<input type="checkbox"/>	小學程度 Primary School
<input type="checkbox"/>	中學程度 Secondary School	<input type="checkbox"/>	大專或以上程度，請註明您的主修學科 College or Above, please specify your major

職業 Occupation

<input type="checkbox"/>	在職，請註明您的職業 Employed, please specify your occupation	<input type="checkbox"/>	在學 Student
<input type="checkbox"/>	退休人士，請註明您退休前的職業 Retired, please specify your occupation before retirement	<input type="checkbox"/>	家庭主婦 Housemaker
<input type="checkbox"/>	其他，請註明： Others, please specify		

義務工作興趣 Volunteer Interests

<input type="checkbox"/>	大型活動 Mass Programme	<input type="checkbox"/>	中心文書支援 Office Work
<input type="checkbox"/>	活動大使 Activity Ambassador	<input type="checkbox"/>	服務當值 Service Point Duty
<input type="checkbox"/>	同路人義工，請註明： Mutual Help Volunteer, please specify:	<input type="checkbox"/>	社區教育/ 宣傳 Public Education / Promotion
<input type="checkbox"/>	其他，請註明： Others, please specify:		

技能

<input type="checkbox"/>	運動，請註明： Sports, please specify	<input type="checkbox"/>	跳舞 Dancing
<input type="checkbox"/>	煮食 Cooking	<input type="checkbox"/>	資訊科技 Information Technology
<input type="checkbox"/>	藝術，請註明： Art, please specify:	<input type="checkbox"/>	其他，請註明： Others, please specify:

備註 Remarks

歡迎您提供更多資料讓我們更了解您 Please feel free to provide further information

資料保密聲明 Confidentiality Agreement Declaration

義工必須遵從香港政府個人資料(私隱)條例與及基督教聯合那打素社康服務(以下簡稱為本機構)所訂立之資料保密守則如下:
It is the obligation of the volunteer of United Christian Nethersole Community Health Service (the "UCN") to strictly comply with the Personal Data Privacy Ordinance of the Government of HKSAR and the following UCN's regulations relating to confidentiality:

- 義工必須適時地向有關負責服務主管申報所有對本機構有影響的資料。
All information may come to the organization's knowledge during or in the course of fulfilling his/ her obligations during his/ her service which may affect UCN, the volunteer must timely disclose such information to his/ her responsible officer of UCN.
- 關於本機構內部行政、本機構電腦系統、其服務/業務、病人、服務使用者、案主及職員之資料，義工必須予以保密。
The volunteer shall treat all information about UCN, including its administration, computerised systems, services, and any information relating to UCN's patients, clients, service users and employees in strict confidence.
- 義工 (在服務期間與及離開本機構後)不得在未經本機構書面授權下私自取用，或向第三者披露任何有關本機構內部行政、本機構電腦系統、其服務/業務、病人、服務使用者、案主及職員資料。
The volunteer will not, either during the continuance of his/ her employment with UCN or thereafter, disclose to any person any information about UCN, including its administration, computerised systems and services, and any information relating to UCN's patients, clients, service users and employees, which come to his/ her knowledge during service, except information has already been known to the public.
- 本機構一旦發現任何義工違反本機構保密守則，本機構會要求義工立即終止在本機構之任何服務。
UCN will terminate the service with the volunteer if he/ she has violated this Confidentiality Agreement.

本人明白以上資料保密守則及同意切實遵行

- I fully understand the terms and condition of the above Confidentiality Agreement and agreed to strictly comply with it at all times.

申請人須知 Note for Applicant

本機構承諾確保義工資料不被外洩或轉移作其他未被本機構准許之用途。

All personal data will be kept confidential and will not be transferred to other organization without our approval.

本人同意基督教聯合打素社康服務收集本人資料的目的，並願意接受義工服務安排。

I agree to the collection of the above personal data by UCN for the purpose of volunteer registration and accept the volunteer arrangement.

本人同意基督教聯合打素社康服務毋須經本人的審查而可使用本人之肖像、姓名、錄音、錄影和訪問作為推廣之用。

I agree that UCN has the right to use my portrait, name, recording, video footage, interview for promotion use.

申請人 Applicant	
姓名 Name	
簽署 Signature	
日期 Date	

負責職員 Staff Responsible	
姓名及職位 Name and Position	
簽署 Signature	
日期 Date	

- ◆ 填妥表格後請電郵至 info-tpdhce@ucn.org.hk 或寄回/親身交回新界大埔安埔路 12 號富善商場 1 樓 F115 至 F116 室大埔地區康健站主中心

Please submit the completed form by email (info-tpdhce@ucn.org.hk) or by mail (Tai Po DHC Express Core Centre, Shop Nos. F115 & F116, First Floor, Fu Shin Shopping Centre, 12 On Po Road, Tai Po, N.T.)

- ◆ 查詢電話 Enquiry : 2468 2268