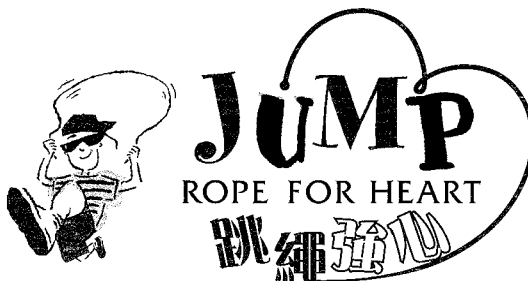


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Organized by:
Hong Kong College of Cardiology



established since 1999

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主辦機構：
香港心臟專科學院

Entry Form (20__/20__)

School: _____ Principal: _____

Address: _____

JRFH Coordinating Teacher: _____ Tel: _____ Fax: _____

It is the **first** year we join the Program °

Proposed date of Jump Off Day: (Y/M/D) _____

Estimated no. of participants: _____ Class of participants: _____

Please use ✓ to indicate the materials you require and specify the quantity.

	<u>Handle color</u>		<u>Height</u>		
<input type="checkbox"/> Single rope (Total 50pcs)	8ft (L.blue)	_____ pcs	(149-160cm)	<input type="checkbox"/> "Heart ambassador" pins	(10pcs)
	9ft (Purple)	_____ pcs	(161-180cm)	<input type="checkbox"/> JRFH User's Guide	(1pc)
	10ft (D.blue)	_____ pcs	(>181cm)	<input type="checkbox"/> JRFH Poster	(3pcs)
<input type="checkbox"/> Double dutch (Total 3pcs)	14ft (Yellow)	_____ pcs		<input type="checkbox"/> Collection pledge (each student 1pc)	_____ pcs
<input type="checkbox"/> Long rope (Total 2pcs)	24ft (Pink)	_____ pcs		<input type="checkbox"/> Skipping posters (40 pages)	

☞ We agree to launch the Jump Rope for Heart Program in 20____/20____, including **teaching skipping skills**, **heart health education**, **fund raising** and **organizing Jump off Day**. °

Signature of principal & Chop

Signature of coordinating teacher

Date

Please send the completed entry form to JRFH Secretariat (Fax: 2899 2045)