衛生署控制病毒性肝炎辦公室 乙型肝炎健康宣傳易拉架借用申請表

Viral Hepatitis Control Office, Department of Health Loan Form for Health Promotion Roll-up Banners of Hepatitis B

申請方式	請填妥此申請表,然後傳真到 2117 0812 或 電郵至			
Application	hepatitis@dh.gov.hk 衞生署控制病毒性肝炎辦公室,本署職員將			
Method	聯絡閣下安排領取。			
	Please complete this application form and return it by fax (2117 0812)			
	or email (hepatitis@dh.gov.hk) to Viral Hepatitis Control Office,			
	Department of Health. Our staff will contact you for the arrangement.			
聯絡電話	2748 6753			
Contact No.	2710 0733			
地址	九龍九龍灣啟仁街九號九龍灣健康中心九樓			
Address	9/F, Kowloon Bay Health Centre, 9 Kai Yan Street, Kowloon Bay,			
	Kowloon			

借用條件

Conditions of Loan

- i. 申請人最遲須於擬借用日期前十四天提出申請。衞生署會按先到先得方法處理借用申請。 Application should be submitted at least 14 days prior to the proposed loan period. All applications will be processed by Department of Health (DH) on a first-come-first-served basis.
- ii. 申請如獲批准,借用機構代表須自行安排運送,蒞臨衞生署控制病毒性肝炎辦公室領取及 交還易拉架。
 - If the application is approved, representative(s) of the organisation have to make own arrangements to collect the roll-up banners from and return to Viral Hepatitis Control Office (VHCO), DH.
- iii. 所有物品只可作非牟利宣傳及健康教育用途。
 - All items can only be used for non-profit publicity and health education purposes.
- iv. 易拉架如有損毀或遺失,申請人須立即通知本辦公室。香港特別行政區政府(簡稱「政府」) 保留追究權利。
 - Any damage to or loss of the roll-up banners must be reported to VHCO immediately. The Government of the HKSAR ("the Government") reserves the right to seek all remedies.
- v. 申請人必須負責展示期間的安全措施。在任何情況下,易拉架在申請人保管期間對任何人或 物品造成任何傷害或損毀,政府均無須承擔法律責任。
 - Applicants shall be responsible for the safety measures during the display period. Under no circumstances shall the Government be liable for any harm or damage to any person or property caused by the roll-up banners when they are in the custody of applicants.
- vi. 如有任何爭議, 衞生署保留最後決定權。
 - In case of any dispute, the decision of DH shall be final and conclusive.

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衞生署控制病毒性肝炎辦公室 乙型肝炎健康宣傳易拉架借用申請表

Viral Hepatitis Control Office, Department of Health Loan Form for Health Promotion Roll-up Banners of Hepatitis B

	· (所有資料均必須填寫	【資料	申請丿
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Details of applicant (All information must be filled in)

Details of applicant (All illiormation	must be miled m)	
機構名稱		
Name of Organisation		
機構地址		
Full Address of Organisation		
申請人全名		
Full Name of Applicant		
職位		
Post		
電話		
Telephone No.		
傳真 (如有)		
Fax No. (if any)		
電郵地址		
Email Address		
申請借用日期 (日/月/年)	由	至
Loan Period (DD/MM/YY)	From	То
活動簡介 (請列明活動地點及性質)	地點 Location	
Descriptions of Event (Please specify		
the location and nature of the event.)	性質 Nature	
	簡介 Descriptions	
對象		
Target Audience		
本人現聲明上述資料正確無訛,沒	沒有遺漏,並願意遵守有關	暑 的借用條件。
I hereby declare that all the information give	en on this form is correct and cor	mplete, and agree to abide by the
Conditions of Loan.		
申請人簽署	機構印鑑	申請日期
Signature of Applicant	Organisation Chop	Date of Application

本表格提供的資料只供處理這次申請之用

The information provided in this form will be used for processing this application only

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