

Sponsorship Form

Please send to Room 303, 7 Carmel Village Street, Homantin, Kowloon
Hong Kong, or fax to: 27619995, or email to: sponsor@hkmsa.org.hk

Ref. no. (Official use)

Close of Application: 16 July 2018

Check ✓ the items you want to support. Each sponsorship form can be used for one category of competition class. Please refer to “List of Sponsorship Opportunity” for classes and prizes distribution.

Hong Kong Schools Music Festival		Sponsorship duration: <input type="checkbox"/> 1 year (71 st Music Festival) <input type="checkbox"/> 3 years (71 st to 73 rd Music Festival)		
Class: _____				
Item	Solo / Duo Class	Ensemble Class	Group Class	Scholarship Class
Plaque	<input type="checkbox"/> 1 st place	N/A	N/A	N/A
	Name of plaque (Eng): _____			
	獎牌名稱 (中文): _____			
Trophy	<input type="checkbox"/> 1 st place	<input type="checkbox"/> 1 st place	<input type="checkbox"/> 1 st place	<input type="checkbox"/> 1 st , 2 nd , 3 rd place
	Name of trophy (Eng): _____			
	獎盃名稱 (中文): _____			
Cash Prize	<input type="checkbox"/> 1 st place HK\$ _____	<input type="checkbox"/> 1 st place HK\$ _____	<input type="checkbox"/> 1 st place HK\$ _____	<input type="checkbox"/> 1 st place HK\$ _____
	<input type="checkbox"/> 2 nd place HK\$ _____	<input type="checkbox"/> 2 nd place HK\$ _____	<input type="checkbox"/> 2 nd place HK\$ _____	<input type="checkbox"/> 2 nd place HK\$ _____
	<input type="checkbox"/> 3 rd place HK\$ _____	<input type="checkbox"/> 3 rd place HK\$ _____	<input type="checkbox"/> 3 rd place HK\$ _____	<input type="checkbox"/> 3 rd place HK\$ _____
	Name of cash prize (Eng): _____			
	獎金名稱 (中文): _____			
Venue Hiring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Title Sponsor	<input type="checkbox"/>			

Sponsor Information

- Name to be acknowledged in publicity materials:
 - Name of Sponsor (Eng): _____ * (Mr / Ms / Miss / Dr / Prof)
贊助人士姓名(中文): _____ *(先生/女士/小姐/博士/教授)
 - Name of Organization (Eng): _____
贊助機構名稱(中文): _____
 - Anonymous
- Name on receipt: _____
- Name of contact person (if different from the Sponsor): _____
- Tel: _____ Fax: _____ Email: _____
- Mailing address _____

Signature: _____ Organization Chop (if applicable): _____

Position (if applicable): _____ Date: _____

*Please delete as appropriate

Remarks:

- Your personal data will be treated as strictly confidential and will be used for issuing official receipts and other communication purposes.
- Official reply will be sent after the approval by the Executive Committee.