



THE VALIANT 2024 – ALLIANCE

Application Form



I. Personal Particulars

Hong Kong Air Cadet Corps Hong Kong Adventure Corps

Name: _____
Surname Given Name in Chinese
(as printed on HKID)

Date of Birth: _____ / _____ / _____ Age: _____
 dd mm yyyy as of 26 Dec 2024

HK Identity Card No.: _____ ()

Contact: _____
Home Number Mobile Number Email Address

Unit: _____ Rank: _____ Serial Number: _____

II. Service History (applicable to HKACC only)

Present Rank: _____ Date of Last Promotion: _____

Present Classification: _____ Date of Advancement: _____

Position: _____ Duration: _____

Have you participated in previous "The Valiant"(s)? Yes No
(Please check the appropriate box)

If yes, please specify:

Year _____ Post _____

Year _____ Post _____

Year _____ Post _____

Year _____ Post _____

III. Qualifications and Skills

Please check the appropriate boxes.

First Aid Certificate Yes No

Type of First Aid Certificate: _____

Valid Until: _____ Issuing Authority: _____

Instructor Ratings by HKACC (or equivalents)

- Footdrill Elementary First Aid Qualified Aviation
- Expedition Physical Assessment Others: _____

Instructor Ratings by HKAC (or equivalents)

- Footdrill Others: _____

IV. Declaration

I, _____ (name of applicant), hereby declare that all the information provided in the form is complete and true to the best of my knowledge. I understand that the above activity may involve physical exercise and adventurous training, and agree that the Hong Kong Air Cadet Corps, Hong Kong Adventure Corps and their members shall not be responsible for accidents or injuries, if any, occur to me during the training. I declare that I have no health problems, apart from those stated in the ‘‘Health Condition Declaration’’, which prevents me from participating in the above activity.

Signature of Applicant: _____

Name of Applicant: _____
(in BLOCK LETTERS)

Date: _____

V. Declaration by Applicant’s Parent or Guardian, or Authorized Person by the Parent or Guardian

This part is to be completed by ALL cadet members. The parent, guardian or authorized person must be at the age of 18 or above.

I agree to allow the participation of this applicant in The Valiant 2024 – Alliance and declare that he/she does not suffer from illness, apart from those stated in the “Health Condition Declaration”, that renders him/her unfit for the activity. Hong Kong Air Cadet Corps, Hong Kong Adventure Corps and their members shall not be liable for any injury or death which the participant may suffer from the activity, if the cause of injury or death is due to his/her negligence or inadequacy in health and fitness.

I also agree be the contact person in the case that the applicant has any accident or incident which requires immediate attention in the course of the activity.

Signature of Parent, Guardian or Authorized Person: _____

Name of Parent, Guardian or Authorized Person: _____
(in BLOCK LETTERS)

Contact Number: _____

Date: _____

To be completed by the Organising Committee

Documents Checked Application Form Par-Q Form
 Health Condition Declaration Camp Fee

Selection Result Accepted Rejected Reserve

Joining Approval Approved Not Approved

Remarks: _____

All personal data will be kept and managed according to the respective Corps Personal Data (Privacy) Guidelines. They are only used for administrative purpose during the preparation and execution of the camp and will be disposed after the event.