



Application for Registration as a Registered Exercise Professional 注册体适能专业教练申请表

Individual Details 个人资料:

Student ID 学员编号		Name in Chinese 中文姓名	
Family Name (English) 英文姓氏		Given Name (English): 英文名字	
Date of Birth 出生日期	日 月 年 DD ____/MM ____/YY ____	Email address (ESSENTIAL) 电子邮箱 (必填)	
Mailing Address 地址			
Phone (home) 住宅电话		Phone (Mobile) 手提电话 / 传呼机	

Qualification Requirements 资格要求:

All **valid** AASFP-certified Advanced Personal Trainers (APT), with a validity period of 12 months or more on their APT certificate, are eligible to register as a Registered Exercise Professional. For those with less than 12 months validity left on their APT certificate, you will be required to provide proof that you are signed up for courses and workshops to fulfill the 2.4 CEU requirement in order to register.

所有持 AASFP 高级私人健身教练 (APT) 证书且有效期在一年及以上者, 都可注册为注册体适能专业教练。APT 证书有效期少于一年者, 则需提交完成 2.4 持续教育学分(CEU)所要参加的课程和工作坊的证明, 方可完成注册。

Work Experience 工作经验:

Job Role 职位	Employer 公司名称	Period 时间

Payment Details 注册费用

All registrations are valid for 2 years starting from the day of registration.

注册的有效期为 2 年, 从注册之日起计算。

Membership Package 会员类别	Registration Fee 注册费用			Please ✓ the box 请在对应 方框打✓
	Hong Kong 香港 (HKD/港币)	China 中国 (RMB/人民币)	Overseas 海外 (USD/美金)	
AASFP Non-Members 非会员	1,600	1,600	230 + 25 (Service Charge/ 服务收费)	<input type="checkbox"/>
Standard Members 普通会员	1,200	1,200	-	<input type="checkbox"/>
Professional Members 专业会员	800	800	-	<input type="checkbox"/>

For Hong Kong and Overseas Payment 香港及海外付款手续

- Cheques payment (in Hong Kong Dollars only) 支票付款 (港币单位)

Cheques should be crossed and made payable to "Asian Academy for Sports and Fitness Professionals Limited".

Please do not send cash.

划线支票抬头请写“亚洲运动及体适能专业学院有限公司”, 切勿邮寄现金。

- HSBC Bank payment 通过汇丰银行付款

You may deposit to our **HSBC** account no. “ 636-046252-001 ”

可直接付款至 AASFP 在 **汇丰银行** 的账户, 账号为 “ 636-046252-001 ”

** Please send the copy of deposit slip for AASFP reference 请寄回汇款收据影本, 以便 AASFP 核对。

For China Payment 中国内地付款手续

(If you have any enquiries please contact us at +86 (10) 6712 3689. 若您对注册还有什么问题, 欢迎致电 +86 (010) 6712 3689)

注册者请汇款至:

开户行: 中国工商银行北京崇文门外大街支行

帐号: 0200000509024211611 户名: 北京高尼国际体育发展有限公司

汇款后请将收据传真至: 010-6714 8183

并写明您的地址、邮编及联系电话, 我们会尽快与您联系。

放眼世界 - 与 AASFP 携手, 获得通行全球的教练执照!



Searchable Database 可供检索的数据库

REPs runs a searchable database for members of the public wishing to find a Registered Exercise Professional in their area. All AASFP Registered Exercise Professional will also be listed on the AASFP Trainer Database

REPs 为注册的体适能专业教练建立了一个数据库，可供公众从中搜索自己区域内的注册体适能专业教练。
所有 AASFP 的注册体适能专业教练同时将被列入 AASFP 教练数据库。

Declaration 声明

- All information provided on this form is accurate
- To follow the REPs Code of Ethical Conduct (a copy may be downloaded from www.reps.org.nz or www.aasfp.com)
- To be bound by any complaints process of AASFP & REPs
- That I give AASFP & REPs permission to contact any third party to verify any details of my registration application
- To agree to any audits or reviews AASFP & REPs may undertake to verify my level of registration and/or competencies (AASFP & REPs may randomly check the competencies of any registered individual)
- To keep AASFP & REPs updated as to my status as an exercise professional, including contact details & place of work
- To allow AASFP & REPs to disclose to third parties my registration status
- To undertake any identified training or assessment that AASFP & REPs identifies as needed
- That I accept AASFP and REPs informational materials via methods including but not limited to electronic mail (e-mail), Short Message Service (SMS), letters, AASFP newsletters, and other information packages.
- 本申请表所提供的一切信息均属真实有效。
- 遵守REPs职业道德规范及工作守则（可从www.reps.org.nz 或www.aasfp.com 下载）。
- 本人同意受到投诉后，接受 AASFP 和 REPs 的处分。
- 本人同意 AASFP 和 REPs 向第三方核实此申请表中填写的内容。
- 同意 AASFP 和 REPs 对本人进行审核以鉴定本人注册的水准和/或能力（AASFP 和 REPs 可随时检查已注册教练的水准）。
- 保证向 AASFP 和 REPs 提供本人最新的相关数据，包括联络方式和工作地点。
- 同意 AASFP 和 REPs 向第三方透露本人的注册情况。
- 接受 AASFP 和 REPs 认为必需的培训或评估。
- 本人愿意接受所有信息文件经由亚洲运动及体适能专业学院(AASFP)和 REPs 以任何方式，如电子邮件、电话短讯、 邮递或其它途径发出。

Signature 签署 _____

Date 日期 _____

Post completed form to 填妥申请表后请邮寄至:

For Hong Kong and Overseas 香港及海外

Asian Academy for Sports & Fitness Professionals

Units 601-607, MLC Millennia Plaza, 663 King's Road,
North Point, Hong Kong

亚洲运动及体适能专业学院

香港北角英皇道 663 号万诚保险千禧广场 6 楼 601-607 室

For China 北京分校

Asian Academy for Sports & Fitness Professionals

Room 305-306, Jingwen Building, #114 Chongwenmen Street,
Beijing, PRC 100062

亚洲运动及体适能专业学院

北京市崇文门外大街 114 号京文大厦 305-306 室 邮编：100062

Your application will be processed, and we will provide you within 28 working days. You will receive a re-registration reminder 1 month prior to expiration, and also details of ongoing education requirements.

我们会受理你的申请，并在 28 个工作日内与你联络。注册期满前一个月，我们会提醒你再次注册，并通知你目前持续教育的情况。

For Office Use Only 仅限内部使用

Student No. 学员编号: _____ Registration Fee 学费: _____
Receipt # 收据: _____ Cash 现金 Cheque No. 支票号码: _____
Consultant 经手人: _____ Membership # 会员号码: _____
Membership Package 会员类别: Professional 专业会员 Standard 普通会员 Non-member 非会员
AASFP Advanced Personal Trainer (APT) Certificate Expiry Date:
AASFP 高级私人教练 (APT) 证书到期日: _____

Checklist for Application

申请材料清单

- Complete contact details – including email address
提供完整的联络方式 – 包括电邮地址
- Included Payment 费用
- Reviewed code of ethical conduct
阅读并接受 REPs 职业道德规范及工作守则
- Included copy of APT certificate
APT 证书印本
- Signed Form 签名后的申请表

*For all Registered Exercise Professionals who wish to work abroad, a First Aid Certificate (not CPR) is required. Please ask Front Desk for further information.

*希望到海外工作的注册体适能专业教练，还需要持有急救证书（不是心肺复苏）。请与前台联系获得详细信息。

Received REPs Certificate and Registration Card

Signature : _____
Date: _____