



中國香港學界體育聯會

THE SCHOOLS SPORTS FEDERATION OF HONG KONG, CHINA

香港九龍何文田迦密村街七號地下及二樓 G/F & 1/F, 7 Carmel Village Street, Homantin, Kowloon, Hong Kong. Website: www.hkssf.org.hk

Head Office
Room 203
Tel: 2711 9182 Fax: 2761 9808
E-mail: hkssf@hkssf.org.hk

HK Island & Kln Office
Room 203
Tel: 2711 9182 Fax: 2761 9808
E-mail: hkssrc@hkssf.org.hk
hikps@hkssf.org.hk

External Office
Room 201
Tel: 2768 8212 Fax: 2768 4525
E-mail: external@hkssf.org.hk

N.T. Office
Room 102
Tel: 2711 2823 Fax: 2761 4821
E-mail: nts@hkssf.org.hk
ntpsac@hkssf.org.hk

All Hong Kong Inter-Secondary Schools Gymnastics Competition 2025-2026

Thank you for your participation in the above event. We would like to inform you that the Team Managers Meeting will be held on 15th April 2026 (Wednesday) with details as follows:

(I) **Team Managers Meeting**

Date : **15th April 2026 (Wednesday)**

Time : **4:00 p.m.**

Venue : **Room 105 at HKSSF (G/F, 7 Carmel Village Street, Homantin, Kowloon)**

Item : (1) Briefing Content: i) Explanation of rules and regulations ii) Explanation of competition routines iii) Drawing of lots for team events

(2) Distribution of competition numbered-bibs – School representatives are required to show the authorization form below for the collection of bibs.

(II) In case no representatives can attend the Team Managers Meeting, please send one representative (with authorization form below) to **Rm 201 External Office from 16 April to 24 April 2026 (Mon-Fri: 09:30-13:00 and 14:00-17:00, Sat: 09:00-11:30) for collection of the said material and information.**

(III) Participating lists and Participating School Lists can be download from HKSSF website (www.hkssf.org.hk) → **【 All HK Inter-Secondary Schools Competitions 】** → **【 Gymnastics 】** → **【 Competition Information 】**

Thank you for your kind attention. If there are any enquiries, please feel free to contact the Secretariat at 27688212.

The Schools Sports Federation of Hong Kong, China

All Hong Kong Inter-Secondary Schools Gymnastics Competition 2025-2026 「Collection of participants' numbered bibs」

Our School (School Name) _____ *School No. _____

Represents (Name) _____ (Contact No.) _____ to collect
numbered bibs for gymnastic competition.

Name of Principal /Teacher-in-charge : _____ School Chop : _____

Signature of Principal /Teacher-in-charge : _____ Date : _____

***Please refer to participating Schools List on website for School No.**