



# 紹邦書院健身室使用者同意書

## Shiu Pong College Fitness Room User Undertaking Form

本人(全名)\_\_\_\_\_ ( 職員/學生/校友/其他 \_\_\_\_\_ )

現同意遵守紹邦書院健身室所規定的使用條款及細則，並確定自身的健康狀況適宜進行健身運動。我也清楚我需全面負責自己使用健身器材時所造成的任何傷害或受傷。澳門大學和健身設備的管理團隊毋須為本人身上的傷害或受傷負上責任。

I, (Full Name) \_\_\_\_\_ ( Please specify: Staff / Student / Alumni /Others \_\_\_\_\_ ) hereby agree to follow the terms and conditions prescribed in the Fitness Room of Shiu Pong College and I also acknowledge my health conditions prescribed in the Fitness exercise . I also clearly understand that I will be fully responsible for injuries that may possibly occur through the use of fitness equipment. The University of Macau and the management team of the fitness facilities hold no liabilities for my own injuries.

簽名 Signature \_\_\_\_\_

日期 Data \_\_\_\_\_