The Chinese University of Hong Kong Handball Open Championship

1. Date: 25-03-2019 (Monday), 26-03-2019 (Tuesday) & 28-03-2019 (Thursday)

2. Time: 18:00 – 22:00

3. Venue: Yeung Ming Biu Indoor Sports Centre (University Gymnasium)

4. System: Single Knock-Out System in both Men's and Women's Group. (Matches

will be cancelled if there are less than 4 participating teams in both groups

respectively)

5. Playing Time: Preliminary Round: 20 minutes whole match

Semi-Final and Final: Two halves of 12 minutes, 24 minutes in a whole

match. (The half-time break is 3 minutes. No team time-out is provided)

6. Eligibility: All CUHK Full-time under-graduated, post-graduated, Teacher's

Certificate students can participate. Each team consists of not more than 12 players. Only two existing/previous University Handball Team player

can be included.

7. Admission: Fill in the registration form (obtained from University Gymnasium, United

College Thomas Cheung Gymnasium or download from the website of the PE Unit) and submit the form to the University Gymnasium on/or before

05:00 pm on 15/03/2019 with HK\$100 deposit fee. (The deposit fee will be

refunded if there is no walk-over)

8. Prizes: Prizes will be awarded to the first 4 teams.

9. Remarks: i. Unless otherwise stated, the competition shall be organized in accordance

with technical regulations of the International Handball Federation

(IHF) dated June 2018.

ii. All team players should be dressed in uniform with same color and design.

iii. No overtime will be played if there is a draw. In this case, 7-meter-throw

with 3 players from each team will be executed.

iv. Guilty player will be suspended one match if he/she has been

given an Exclusion.

v. This regulation is subject to change if it is necessary.

Handball Open Championship Conveners

Mr. Nelson LAM

(Tel. No.: 39433987)

The Chinese University of Hong Kong **Handball Open Championship Entry Form**

	Team Name:			Group: Men's / Women's		
	Person-in-charge:					
	Contact Telephone No.:			Student Card No.:		
	Email:					
	Name	Year	Major	University Team Player*	PE Course Code	Lecturer's Name
1						
(capt	cain)					
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
	(Remark :	*Please use	"√" to inc	licate the University	Men's / Women'	s player.)

Date: _____

Signature: