Sai Kung District Community Centre Subsidy Scheme for Summer Activities 2025 Application Guidelines

Program Objective

To support the developmental needs of underprivileged children and youth, the Centre offers the **Subsidy Scheme for Summer Activities 2025**, enabling eligible Sai Kung District residents to participate in summer activities **free of charge**.

Target Participants

Members aged 6 to 24 from families receiving Comprehensive Social Security Assistance (CSSA) from the Social Welfare Department.

Eligible Courses/Activities for Discounted Fees

- Subsidies apply only to Centre-organized activities between 17 July 31 August 2025.
- Excludes after-school care and activities with existing funding.

Application Method

Eligible individuals can apply in person at the Centre from 24 June 2025. Required documents include:

- 1. Completed application form
- 2. Identification documents (i.e. Student handbook)
- 3. Proof of CSSA status

Note: Applications without the required documents will not be accepted.

Subsidy Details

Each successful applicant can receive a maximum subsidy of **HKD 800 per applicant for up to 2 activities.** Unused subsidy will expire on **August 31, 2025**.

Quota Allocation

Activity Capacity	Subsidized Slots			
1-12	1			
More than 12	2			

Usage and Important Notes

- Members may use the confirmation letter to register for activities at the Centre, paying a HKD 50 deposit per activity (refundable upon achieving 70% attendance).
- Subsidy approval does not guarantee enrollment (subject to availability).
- Limited slots; allocated first-come, first-served.

For Staff Use Only						
File No. :	SKSP25-					

Sai Kung District Community Centre Subsidy Scheme for Summer Activities 2025 Application Form

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Applicant's F	Personal Details						
Name (Mus	st match ID card):			(Chines	e)		(English)
Membershi	p No.:				Gender:	□ Male	☐ Female
Contact No	.:						
Subsidy App	lication (Please tick	k ☑ the ap	propriate box)				
☐ The ap	plicant is a youth fr	om a fami	ily receiving CSSA	A from the Soc	ial Welfare Department.		
File No.: _							
Applicant/Parent Name:			Relationship to Applicant (if applicable):				
Applicant/F	plicant/Parent Signature:			Date:			
Note: Applica	ants under 18 years	of age m	ust provide a par	ent's signatur	е.		
Activity Regi	stration						
Priority	Activity Code Activity I		Name	Activity Fee	St	aff Use Only	
1							
2							
3							
4							
5							
The subsidy o	covers a maximum	of two sur	mmer activities.				
				職員專用			
職員建議	接受	不	接受 是項申	· 請。			
備註:							
職員姓名:	員姓名: 職員簽署:				日期:		
				總幹事專用			
批准	不批	上准 是	項申請。				
 備註:							

簽署:

日期:

姓名: