

香港回教信託基金會總會  
THE INCORPORATED TRUSTEES OF THE ISLAMIC  
COMMUNITY FUND OF HONG KONG  
九龍清真寺暨伊斯蘭中心管理委員會  
九龍彌敦道 105 號 電話：27240095, 傳真：27242661  
KOWLOON MOSQUE & ISLAMIC CENTRE MANAGEMENT COMMITTEE  
105 Nathan Road, Kowloon, Hong Kong.  
Tel. : 27240095, Fax : 27242661  
E-mail: [kowloonmosque@gmail.com](mailto:kowloonmosque@gmail.com)

## VISITING OF KOWLOON MOSQUE & ISLAMIC CENTRE

### Application Form

Name of Applicant/Organization \_\_\_\_\_

Address: \_\_\_\_\_

Contact person: \_\_\_\_\_ Contact Tel.: \_\_\_\_\_ Mobile: \_\_\_\_\_

E-mail \_\_\_\_\_

Visiting date: \_\_\_\_\_ Time: \_\_\_\_\_ No. of Visitors: \_\_\_\_\_

Purpose of visit: \_\_\_\_\_ (Topic to be discussed)

Language required: (English / Cantonese / Mandarin)

Age of visitors: (below 10/ 11-20/ 21-30/ 31-40/ 41-50/ 51-60/ Above 60)

#### Requirements

- 1) The applicant must be an organization/school/college or university.
- 2) All visitors must be properly dressed that will not offend sanctity of the Mosque.
- 3) The visitors must not use any furniture or equipment unless prior permission is given by the Mosque Management.
- 4) Any damage to the Mosque property during the visit must duly be made good by replacement or by compensation.
- 5) Visiting the Mosque with commercial or political purposes are strictly prohibited.
- 6) All visits to the Kowloon Mosque & Islamic Centre are FREE OF CHARGE but we appreciate

#### **Donations.**

Applicant's Name & Signature \_\_\_\_\_

Date: \_\_\_\_\_

Applicant's Official Chop \_\_\_\_\_

#### **Official Use Only**

Co-Ordinator Signature \_\_\_\_\_  
Kowloon Mosque & Islamic Centre Management Committee

Language .....

Speaker .....

Date ..... Time .....