

Registration Form 報名表

Student Personal Information 學生個人資料

Student's Name 學生姓名 _____	Date of Birth 出生日期 _____	Sex 性別 _____	Language 語言 _____
Address 地址 _____			
Telephone No. 電話 _____	Fax No. 傳真 _____	E-mail 電郵 _____	Grade in Chinese School 中文學校級別 _____
Parent's / Guardian's Name 家長/監護人姓名 _____		Relation 關係 _____	Daytime Contact No. 日間聯絡電話 _____
Allergies / Special Care 過敏/特別注意事 _____			

Emergency Contact 緊急事故聯絡人

Name 姓名 _____	Relation 關係 _____	Daytime Contact No. 日間聯絡電話 _____
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	日期 Date	學費 Tuition		日托 Child Care		金額 Amount
		Full 全日	Half 半日	AM 上午	PM 下午	
第一週 Week 1	7/2 – 7/4	\$48	\$30	\$9	\$15	
第二週 Week 2	7/7 – 7/11	\$80	\$50	\$15	\$25	
第三週 Week 3	7/14 – 7/18	\$80	\$50	\$15	\$25	
第四週 Week 4	7/21 – 7/25	\$80	\$50	\$15	\$25	
第五週 Week 5	7/28 – 8/1	\$80	\$50	\$15	\$25	
第六週 Week 6	8/4 – 8/8	\$80	\$50	\$15	\$25	
第七週 Week 7	8/11 – 8/15	\$80	\$50	\$15	\$25	
第八週 Week 8	8/18 – 8/22	\$80	\$50	\$15	\$25	
第九週 Week 9	8/25 – 8/29	\$80	\$50	\$15	\$25	
總額 Total						

For Office Use Only

Fee _____
Receipt No. _____
Date _____
Grade/Class enrolled _____
Staff _____

Refund Policy

1. Full Refund: If the camp is cancelled.
2. Partial Refund: Withdrawals accompanied by a medical certificate are subject to \$20 administration fee.
3. No request for refund will be considered after the start of the course.
4. No request for refund will be considered other than medical reason.



退款

1. 若課程取消，所有費用全部退回。
2. 如因病故申請退學者，須提供醫生證明，除扣除行政費二十元外，可獲退回其餘款項。
3. 若中途因事故輟學，所付之費用，概不發還。
4. 於夏令營開始後，恕不接受退款申請。

Parent Authorization & Consent

本人准許敝子女參加大多倫多中華文化中心仲夏小院子舉辦之活動，並於緊急情況時接受治療。倘若遇上任何損傷或財物損失，本人願意自負一切責任，與大多倫多中華文化中心無涉。(此聲明以下列英文條款為準)

I hereby give permission for my child to participate in the Summer Camp held by Chinese Cultural Centre of Greater Toronto, and to receive any emergency treatment if necessary. I hereby release and forever discharge the CCC from all actions, damages, claims and demands whatsoever arising by reason of participation in the activity. I have read, understood and agreed to the contents of this consent in its entirety.

Signature 簽署 _____	Parent's / Guardian's Signature 家長/監護人簽署 _____	Date 日期 _____
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