

WPP 布道站儿童假期中文品格营报名表

Holiday Program Date /假期营日期: 25/09/2019 - 26/09/2019 (9am-5pm)

(请家长在 8:45-9:00 送孩子到教堂, 5:00 准时接小孩)

Show Time (Parents are welcome) /成果表演 (欢迎家长参加) : 26/09 3:30pm

Address/地址: 200 Tarneit Rd. Werribee VIC 3030

Entitlement/招收: Year 1 - Year 9 (小学一年级至初中三年级的少年儿童)

Fee/费用: 每人 \$30 (含午餐)

Payment Method/付款方式:

Transfer to the following account and attached screenshot

转帐至以下帐号并附上转帐截屏

Acct Name: CMCA WPP BSB: 013598 Acct No: 2332 30675 Bank: ANZ

Name/姓名: _____

Age/年龄: _____ Gender/性别: _____

Home Address/住址: _____

Phone/电话: (家) _____ 手机: _____

Email/电邮: _____

Faith/信仰背景: Christian/基督徒 Yes

Christian family/基督徒家庭 Yes

non-Christian/非基督徒 Yes

Others/其他: _____

Do you have any special instructions for staff regarding your health care and/or diet?

你有任何关于饮食或健康的特殊状况需要让负责人知道吗? 如食物过敏\哮喘等。Yes/有 No/没有

If yes, please explain/如果有, 请列出:

PARENTS CONSENT/家长同意

1. I, _____ give my permission for my child (named above) to participate in the CMCA WPP School Holiday Program 2019.

我_____允许我的孩子(名字同上)参加澳洲华人卫理公会 WPP 布道站假期营 2019。

2. I confirm to the best of my knowledge that my son/ daughter does not suffer from any medical condition other than those listed above.

我确认, 就我所知, 我的儿子/女儿除以上所述, 没有任何其他疾病。

3. As parent, and/or legal guardian, I remain legally responsible for any personal action taken by above named young person

作为父母, 和/或法律监护人, 我对上述年轻人所做的任何个人行为负有法律责任。

4. I understand that the Organizers accept no responsibility for loss, damage or injury caused by or during attendance of the holiday program organized activities.

我理解组织方不需为任何由营地活动引起或参加活动期间所产生的损失或伤害负责。

Parents Signature/家长签名: _____

Date/日期: _____

报名表发送至 syoleen@gmail.com