中華基督教屋崙長老會, 2024 年暑期班 • Chinese Presbyterian Church of Oakland, Summer Program 2024 265 - 8th Street, Oakland, CA 94607 • (510) 452-4963

CLASSES FOR GRADES 2-5

"GROWING, LEARNING, LOVING" Application Form 暑期班報名表

PLEASE READ ALL ATTACHED INFORMATION BEFORE FILLING OUT THIS FORM

SIGN ON THE 4TH AND 5TH PAGES.

填寫表格前必須詳細閱讀所有文件(請在第四,五頁簽署)

Dates	Early Bird Reg. (Prior to 5/19/24) 報名表格於 2024 年 5 月 19 日 奌前截收	Reg. (after 5/19/24) 如在 2024 年 5 月 19 日
*Session 1: June 17–July 5 (6/19 & 7	7/4 are holidays) \$650	\$700
*Session 2: July 8–July 26	\$650	\$700
*BOTH Sessions: June 17–July 26 (6/19 &	7/4 are holidays) \$1,150	\$1,250

^{*}NOTE: Program dates may be subject to change due to the situation of the Coronavirus. We will do our best to inform you of any changes, so please check our website or the front bulletin board of CPC. We appreciate your patience and understanding during this time of uncertainty.

*<u>請注意</u>:由於冠狀病毒疫情影響,此項目日期可能會更改。如有更改,我們會盡快通知你們。請留意我們的網站,網址 登在教堂外的報告版上。多謝各位在這不穩定的時候的合作和忍耐。

每班的學生名額限於 15 名, 以先到先得為準則, 額滿即止.

完整的報名表必須包括一份學員最新的成績報告表,連同報名費用。請在辦公時間內,

~ CLASS SIZE IS LIMITED TO 15 STUDENTS PER GRADE LEVEL ON A FIRST-COME, FIRST-SERVED BASIS. ~

PLEASE MAIL COMPLETED REGISTRATION FORM, A COPY OF THE CHILD'S MOST RECENT REPORT CARD AND YOUR PAYMENT TO THE CHINESE PRESBYTERIAN CHURCH OF OAKLAND, 265 8TH STREET, OAKLAND, CA 94607 OR DROP-OFF DURING EBAYOM OFFICE HOURS AS POSTED IN THE FRONT OF THE CHURCH AND ON OUR WEBSITE:

http://oaklandcpc.pcusa.cc/ebayomsummer.html

PLEASE NOTE THAT THE SUMMER PROGRAM TUITION/FEES ARE NOT ELIGIBLE FOR IRS TAX DEDUCTION PURPOSES AS DETERMINED BY IRS CODE.

I: 學生資料 STUDENT'S INFORMATION

姓氏 LAST NAME	名字 FIRST NAME	請選一項 C	IRCLE ONE:	For Office Use Only
		男 Male	女Female	Date
住址 STREET ADDRESS		出生日期 E	SIRTHDAY	No
				□ Cash
				□ Check #
				Amount: \$
市 CITY	郵區號碼 ZIP CODE	家中電話 F	IOME PHONE	電子郵件地址 EMAIL ADDRESS
2024年8月 份將就讀那一	-年級(選一項)	2024年8月] 份將就讀那	一學校
Grade in August 2024 (C	ircle one)	SCHOOL IN AU	GUST 2024	
	5	//), 5 111		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	3	公立 Publi	c 山 私	立 Private 🗖
曾否參加過長老會的暑期到	性? Attended CPC Summ	ner Program	in the Pas	t? 是Yes□ 否No□
如有, 曾參加過那一年?	If yes, which year	(s)?		

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II:	語	言	能	力	LANGUAGE

HH H HE/J EMIGENCI	4						
英語 ENGLISH	聽 LISTEN □	į	講 SPEAK		書寫 WI	RITE	
中文一廣東話	聽 LISTEN □	į	講 SPEAK		書寫 Wi	RITE	
CHINESE — CANTONESE							
中文一普通話	聽 LISTEN □	į	講 SPEAK		書寫 WF	RITE	
CHINESE—MANDARIN							
OTHER:	聽 LISTEN □	Ī	講 SPEAK		書寫 WF	RITE	
: 聯絡信息 CONTACT 家長資料 PARENTS' INFORM	ATION						
母親姓名 MOTHER'S NAME	日間電話 DAYTIME PHO	ONE	手機電話(CELL PHONE	電子郵位	牛 Emai	L
		N.T.	王継雲話 (CELL PHONE	電子郵位	华 Емат	L
父親姓名 FATHER'S NAME	日間電話 DAYTIME PHO)NE		CEEL I HONE	尼 1 24	, 2.mi	
緊急時若找不到父母可通: In case of emergency and	知:		LEASE CONT	TACT:	關係 RELATIO		
緊急時若找不到父母可通: In case of emergency and	知: PARENTS CANNOT BE REAC	CHED, PI 姓名 N	LEASE CONT	FACT:			
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醫療保險名稱及號碼 MEDICAL INSURANCE NAME AND POLICY NUMBER
身體特殊情況 SPECIAL HEALTH CONCERNS
請列出對食物過敏或對食物的限制
FOOD ALLERGIES AND/OR DIETARY RESTRICTIONS:

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學生身高		學生體重	學生體重			
IEIGHT OF STUDEN	NT:	WEIGHT (WEIGHT OF STUDENT:			
_{青於下列表格填寫}	3您孩子的 T 恤尽	?碼				
LEASE CHECK TH	HE T-SHIRT SIZE	FOR YOUR CHILD A	ND MARK ON TI	HE TABLE BELOW.		
SIZE	寬 WIDTH	長 LENGTH	尺碼	PLEASE CHECK 請選擇		
Youth S	13"	20.5"	小童小碼			
Youth M	15"	22.5"	小童中碼			
Youth L	17"	24.5"	小童大碼			
Adult S	18"	27"	細碼			
Adult M	20"	29"	中碼			
Adult L	22"	30"	大碼			
□ 我的孩子將 □ 我委託 家長以外,我核准以 ther Persons Author	·由家長接送。 M ———接孩子。 以下此人可接送我的 rized to Pick Up Str	My child needs to be possible My child will be pions.	cked up by someor	one else whom I auth		
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VI: 註冊入學手則 GROUND RULES FOR ENROLLMENT

<家長手則>

- 1. 我准許我的兒女參加中華基督教屋崙長老會暑期班所安排的一切活動。 我明白這暑期班會融合基督教的觀點和教導。
- 2. 我會鼓勵我的兒女完成他們的功課。
- 3. 我知道我的兒女若在擾亂學校時,中華基督教屋崙長老會暑期班可要求該學生退學。
- 4. 若我的兒女被要求退學時一切費用恕不退還。
- 5. 我的兒女必需攜同最新的成績表前來註冊。
- 6. 暑期班上課時間是:上午九時至下午五時正。 我不會早上八時四十五分前放下小孩子。我的兒女若要遲到早退或放假外出。我必在二十四小時□用書面通知學校。
- 7. 在每天五時十分後,中華基督教屋崙長老會暑期班對我的兒女不需負任何法律責任。
- 8. 下午五時十分後仍然留在長老會的小孩子,我們會要求家長付每十分鐘五元的費用。
- 9. 學生如損毀教堂設施, 家長要賠償一切維修費用。

我同意以上所寫有關我及我的兒女要遵守的規條。若我或我的兒女犯規,我的兒女將被命令退學, 一切費用 不會退還。

Parents' Ground Rules

- 1. I give permission for my child to participate in all scheduled activities of the Chinese Presbyterian Church Summer Program, understanding that there is an integral Christian perspective.
- 2. I will encourage my child to complete any homework sent home.
- 3. The Chinese Presbyterian Church Summer Program may dismiss my child if he/she is disruptive.
- 4. All fees are non-refundable.
- 5. My child's most recent school report card will be included with his/her registration and payment.
- 6. The summer program runs from 9 am to 5 pm. I will not drop off my child before 8:45 am. If my child will be absent, tardy, on vacation, or needs to leave early, I will inform their teacher at least 24 hours (1 day) in advance. If my child is sick, I will call that morning.
- 7. The Chinese Presbyterian Church is not responsible or liable for my child after 5:10 pm.
- 8. If my child remains on the church premises after 5:10 pm, I will be assessed a penalty of \$5.00 for every 10 minutes or portion thereof.
- 9. I will pay for damages to church property caused by my child.

I have read, understand, and agree to all the above statements for my child and me. I also understand that violation of any of the above rules is ground for the dismissal of my child from the summer program.

我證明以上一切資料屬實 I certify that the above information is correct.

家長簽名 Parent's Signature	日期 Date

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VII: 放棄追究責任同意書 WAIVER AGREEMENT

若遇意外,我允許屋崙華人長老會選定的醫務人員送子女入院治療,又允許子女接受適當的治療, 接受救護車送院,接 受注射,接受麻醉,接受手術籍以急救該申請表的註冊小朋友。我同意屋崙長 老會的職員,義工或參加者在暑期班期間 不論在戶外戶內無需負責意外造成的身體受傷,疾病和物 件損毀。

我同意屋崙華人長老會為宣傳暑期班而為兒童拍攝照片錄影帶,錄音帶或任何錄像裝置的版權。我同意屋崙華人長老會用 以上照片或錄像作將來之用而無需付任何費用,亦無需道明照片中之人仕姓名。

我自願簽這放棄追究責任同意書。我的簽名表明我在法律許可下同意屋崙華人長老會的所有牽涉人員無須負任何責任。

In case of emergency, I hereby give permission to the physician selected by the Chinese Presbyterian Church of Oakland staff to hospitalize, secure proper treatment for, use ambulance, and/or to order injection, anesthesia, or surgery for the registered person named on the other side of this form. I understand that the Chinese Presbyterian Church and any staff, leaders, volunteers, or participants are not responsible for accidental injuries, illnesses and/or property loss that occur during any aspect of the program, including but not limited to activities, classes, field trips, lunches and snacks, and use of premises.

I hereby agree to the right of the Chinese Presbyterian Church of Oakland to photograph, film, videotape, audio record all aspects and participants in the summer program, including my children, or through the use of any other manner of recording by any other means, for the purposes of promoting the summer program. I agree that the Chinese Presbyterian Church of Oakland shall have the continuing right to use any photograph or recording in the future without additional compensation to those recorded or without identification of those recorded by name.

I acknowledge that I am signing this waiver agreement freely and voluntarily, forgoing my right to litigation. By my signature, I intend for the Chinese Presbyterian Church Summer Program, and all personnel involved, a complete and unconditional release of all liability to the greatest extent allowed by the law.

家長簽名 Parent's Signature	日期 Date

VIII: 健康與安全政策 HEALTH & SAFETY POLICIES

我們致力為今年暑期班的學員提供一個健康的學習環境,因此懇請家長切勿帶患病的子女上課。倘若孩子有患病徵兆,或 24 小時發燒不退,敬請家長留小孩在家休息。

假如小孩呈現患傳染病徵兆,他們會馬上被遣送回家,直至體溫在無需服藥的情況下 24 小時之內也不超過度 100 度和 / 或者得到醫生的治癒證明。參加暑期班的學員,需要有「新型冠狀病毒測試陰性證明」 (proof of negative COVID test)。

我同意和明白上述健康安全措施。我的簽署證實在過去 14 天內未到過傳播感染病毒的國家,又或者曾經與患有新冠狀病毒的人士接觸,又或者在飛機上與有感染的病患者接觸。如情形有所改變,我會立即通知暑期班主任。

We strive to create a healthy environment for our students in our summer program, and therefore, it is important not to send your child to our program if they are sick. If your child is showing any symptoms of being ill, had a fever for 24 hours, or have vomited the night before, you **must** keep your child home.

Whenever there is a reason to believe that a child is suffering a recognized contagious or infectious disease, he/she shall be sent home or will not be permitted to enter the program, as well as shall not be permitted to return until a child does not have a fever above 100° for 24 hours without fever reducing medication and/or we have received a doctor's note that your child has been cleared. You must show proof of a negative COVID test for your child to return to the program.

I acknowledge that I understand the above health and safety policies. Furthermore, by my signature, I confirm that my child has not traveled within the past 14 days to a country "with widespread sustained transmission" nor have had close contact with someone showing COVID-19 symptoms or on a plane with a person showing symptoms. I will notify the Program Director immediately if this situation changes.

家長簽名 Parent's Signature	日期 Date