

New York Chinese Cultural Center
2018 Summer Program Registration Form
兒童暑期夏令營報名表

Please complete in clear writing and return this registration form including \$100 non-refundable deposit per week to:
New York Chinese Cultural Center, 137 Henry Street 4th Floor, New York NY, 10002
Or alternatively scan and email to school.assistant@nychineseculturalcenter.org

請書寫整潔把報名表填好和每週 \$100 不發還訂金一同交給學校。
郵寄到 New York Chinese Cultural Center, 137 Henry Street 4th Floor, New York NY, 10002 或者電子郵件發送到：
school.assistant@nychineseculturalcenter.org

A. CLASS INFORMATION 課程資料

Weeks Attending 周出席

☐ Full session (8 weeks) 全星期 (八個星期)

July 七月

☐ 9-13

☐ 16-20

☐ 23-27

August 八月

☐ 30-3

☐ 6-10

☐ 13-17

☐ 20-24

☐ 27-31

Tuition 學費:

One Week Session: \$395

Additional Week (10% off): \$355.50

Immediate Family Member (10% off): \$355.50

Total Number of Weeks 總計星期數: _____

* Campers are responsible for their own lunch

* Please dress comfortably in clothes that are easy to move around in

To be completed by NYCCC:

Tuition:

Registration Fee: \$25

TOTAL: _____

B. PERSONAL INFORMATION 學生個人資料

Last Name 姓: _____ First Name 名: _____ MI: _____

Age 年齡: _____ Gender 性別: _____ Home Tel 夜間電話: _____

Parent Cell Phone 手機: _____ Parent Email 電郵地址: _____

Address 地址: _____ Apt. # 房號: _____

City 城市: _____ State 州: _____ Zip Code 郵政編碼: _____

Birth Place 出生地: _____ Birth Date 生日: _____

C. PARENT CONTACT INFO 家長聯繫方式

Parent's English Name 家長英文名: _____ Daytime Phone 白天電話: _____

Parent's English Name 家長英文名: _____ Daytime Phone 白天電話: _____

CONTACT PERSON

#1 _____ Cell Phone 電話: _____

除了家長以外的緊急聯繫人 #1 _____ Work Phone 工作電話: _____

CONTACT PERSON

#2 _____ Cell Phone 電話: _____

除了家長以外的緊急聯繫人 #2 _____ Work Phone 工作電話: _____

D.

- ☐ My child is in good health and can participate in all activities of NYCCC's dance classes.

我的孩子健康良好可以參加新苗的活動。

- ☐ In case of accidental injury while attending classes, I give permission to NYCCC to take appropriate measures to handle the situation while attempts are made to contact my parents or the emergency contact person listed above.

上課時,如有意外受傷,我允許新苗作適當處理並通知父母或緊急聯絡人。

- ☐ Does your child have any allergies or medical/behaviorial conditions? If yes, please describe: _____

你的孩子有過敏問題, 醫療/行為狀況嗎? 如果有,請說明: _____

E. HOW DID YOU HEAR ABOUT US? 您是如何知道我们的活动?

- ☐ Friend Recommendation / Word of mouth 朋友推薦

- ☐ Returning Student 已參加過

- ☐ Website / Google 網絡搜索 Please specify which website 哪個網站: _____

- ☐ Flyer 傳單 Please specify which website 在哪個地方看見的: _____

- ☐ Parent Forum / Camp Listing 家長討論 / 令營單 Please Specify 請列明: _____

Date 日期: ____/____/____

Signature 簽名: _____

*Summer program requires a minimum number of student enrollments to run. Parents will be notified by May 31



CONSENT AND LIABILITY FORM

I am a custodial parent or legal guardian of _____, the child I am enrolling in New York Chinese Cultural Center Summer Program. The child I am enrolling is healthy and fully able to participate in all program activities.

ACTIVITIES AND PERFORMANCES

I hereby acknowledge, and/or grant permission for my child to participate in all activities in or outside the Program's location. I give permission to New York Chinese Cultural Center to take my child on all trips, including outings to nearby parks that may take place unannounced via email up until the day of the activity.

MEDIA

I grant permission to photograph or record on video all program activities and to use any photograph or video in which my child appears for promotional literature, displays or any other format representing The New York Chinese Cultural Center to the community including the website, flyers, and social media. I release all rights to such.

PAYMENT POLICY

I agree and understand that there is a non-refundable \$100 deposit per week to ensure my child's spot. I understand that the non-refundable deposit will be deducted from the cost of my weekly tuition. If I choose not to leave the non-refundable deposit per child, I understand that I may be locked out of a session. I understand and agree that **all payment will be made in full 2 weeks prior to the start of the summer program**. If my payment is made after the due date I understand there will be a **\$25 late fee charge** in addition the tuition balance. If I register my child for additional weeks of the program after the first day of the program, I understand that there will be a \$20 administration fee for each additional week.

BOUNCED CHECK AND FEE POLICY

I understand and agree that New York Chinese Cultural Center will charge me a \$25 surcharge for any bounced check they receive from me for the program and that New York Chinese Cultural Center reserves the right not to accept additional checks from me and will only accept cash, cards or online payments for future program payments.

ABSENCES and WITHDRAWALS

I understand that no refunds or adjustments will be made for incidental absences including, but not limited to, illness or failure to provide a medical form or identification or consent requested for any trip. I understand that if the program finds it necessary to withdraw my child from the program, I will be charged for the number of days and/or weeks s/he attended prior to the withdrawal date.

OTHER POLICIES

I understand that students must bring their own lunches.

New York Chinese Cultural Center reserves the right to ask your child to leave the program if it is determined that the child is not able to participate in the program or if the child is not able to follow the program's rules and regulations.

New York Chinese Cultural Center reserves the right to ask your child to leave the program if it is determined that s/he is a danger to themselves or others or it is determined by staff that New York Chinese Cultural Center Summer Program is not appropriate for your child. If a parent withholds information pertaining to special needs, behavioral, physical or other, and it is determined by staff that New York Chinese Cultural Center Summer Program is not appropriate for your child, refunds will not be given. New York Chinese Cultural Center asks that the parent/guardian disclose all pertinent information regarding their child's past school experiences and/or behavior so we may help you decide if our program is appropriate for your child.

MEDICATION and CONSENT FOR MEDICAL EMERGENCY

I agree to provide New York Chinese Cultural Center with a fully completed medical and immunization form, based on an exam performed less than one year prior to September 1st, 2018.

I understand that no medications will be administered by the staff at New York Chinese Cultural Center Summer Program.

I do hereby give authority to the New York Chinese Cultural Center Summer Program staff to obtain necessary emergency medical treatment for my child with the understanding that the family will be notified as soon as possible.

I have read and understand the above information and agree to the terms.

Parent #1 Name

Parent #1 Signature

Date

Phone Number

Parent #2 Name

Parent #2 Signature

Date

Phone Number



Summer Program - Authorizing child pick up list

I, _____

Am the custodial parent or legal guardian of _____

and give permission to the following people to pick up my child at the end of the daily program.

_____ Name	_____ Relationship to child
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Phone number

_____ Name	_____ Relationship to child
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Phone number

_____ Name	_____ Relationship to child
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Phone number

_____ Name	_____ Relationship to child
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Phone number

_____ Parent #1 Name	_____ Parent #1 Signature
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_____ Date	_____ Phone Number
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_____ Parent #2 Name	_____ Parent #2 Signature
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_____ Date	_____ Phone Number
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