

2017 Chinese Summer Camp Registration form

**Please circle: Chinese/Singing
+Calligraphy, +Children’s Drawing, +Sketch, +Brush painting**

First Name (in English & Chinese): _____ Last Name: _____

Sex: ___ DOB: ___/___/___ (mm/dd/yy), regular school _____ grade _____

Home Address: _____ City: _____ Zip: _____

Mother: _____ Work #: _____ Cell #: _____

Email _____ WeChat ID (optional) _____

Father: _____ Work #: _____ Cell #: _____

Email _____ WeChat ID (optional) _____

Local Emergency Contact: (other than parent/guardian)

Name: _____ Home Phone: _____ Work Phone: _____

Child’s Physician: _____ Location: _____

Medical Insurance Carrier: _____ Policy or Group ID #: _____

In the event your child gets accidental injury during our program, we will notify the parent immediately. If emergency treatment is necessary, we will notify the parent immediately and/or call 911 or take the child to the nearest hospital. We may also notify the physician listed on the medical information. Any expenses incurred for the above actions will be the responsibility of the parent, not the school and its staffs.

I hereby authorize the camp and its staff members to take full charge of any emergency that may possibly occur. I will not hold the school and any staff member liable in case of accidents or injuries.

Please Circle:

June 12-16 June 19-23 June 26-30 July 3-7* July 10-14

July 17-21 July 24-28 July 31-Aug 4 Aug 7-11 Aug 14-18 Aug 21-25

*no camp on July 4 (\$30 will be deducted from regular weekly tuition).

----- Registration fee and Deposits -----

Please attach a check made payable to ASAC for \$35 registration fee plus \$50 per week deposit, mail to 5501 Weston Downs Dr, Durham, NC 27707

Once registration confirmed, registration and deposit fees are non-refundable/non-transferable under any circumstance.

Registration fee.....\$35

Deposit: \$50X ___ week(s) checked above.....\$ _____

Total amount attached.....\$ _____

Parent Signature _____ Date: _____