



# 2010 列治文華人浸信會假期聖經學校 報名表

## CBCR Vacation Bible School Registration Form



父親姓名: \_\_\_\_\_ Father's Name : \_\_\_\_\_

母親姓名: \_\_\_\_\_ Mother's Name : \_\_\_\_\_

地址 Address: \_\_\_\_\_

電話 Phone: (H) \_\_\_\_\_ (W) \_\_\_\_\_ (Cell) \_\_\_\_\_

電郵 Email: \_\_\_\_\_

兒女姓名 Children's Name	生日 Birthday	年齡 Age	班級 Sch. Grade (Just completed)	食物過敏或其他 Medical Conditions Allergies or other
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____

緊急聯絡人 Emergency Contact Person \_\_\_\_\_ 電話 Phone \_\_\_\_\_

誰可接送你的孩子回家?

Who can pick your child up at the end of VBS days? \_\_\_\_\_

你有參加本教會(或其他教會)和/或主日學嗎? \_\_\_\_\_ 有 \_\_\_\_\_ 沒有

Do you attend church and/or Sunday school at our or other church? Yes No

我們可否為你的孩子拍照? \_\_\_\_\_ 可以 \_\_\_\_\_ 不可以

May we have permission to photograph your child? Yes No

我們可否刊印你孩子的照片作宣傳之用? \_\_\_\_\_ 可以 \_\_\_\_\_ 不可以

May we have your child's photo for the purpose of promotion? Yes No

### Medical Release Form

I, (We), the undersigned parents or guardians do hereby authorize the adult volunteers of Chinese Baptist Church of Richmond as agents to consent to any medical or surgical care deemed advisable by any accredited physician or surgeon in an approved emergency clinic or hospital. I further release from any liability Chinese Baptist Church of Richmond, any of its ministers or leaders in the event of an accident en route, during and returning from the above-mentioned event.



\_\_\_\_\_ Date signed



\_\_\_\_\_ Parent/Legal Guardian Signed



### 媽媽班 Mom's Classes

紙藝: (星期一至三), 指導: 梅惠秀	_____ 能參加	_____ 不能參加
Paper Craft: (Mon. to Wed.), Instructor: Christine Yung	am attending	not attending
折紙手工: (星期四至五), 指導: 蔡師母	_____ 能參加	_____ 不能參加
Folding Craft: (Thurs. to Fri.), Instructor: Mrs. Chua	am attending	not attending