

NEW ENGLAND INSTITUTE OF EDUCATION

2019 Summer Camp

[中文夏令營]

Registration Form

姓名: (中文) _____ (英文) _____ 性別: _____

Name (Chinese) _____ (English) _____ Sex _____

年齡: _____ 出生日期: _____年____月____日 年級: _____ (請填今秋的年級)

Age _____ Birthdate: year / month / day Grade (2014 Fall) _____

住址: _____, _____, _____, _____

Address _____ City _____ State _____ Zip Code _____

電話: (住家) _____ 緊急聯絡人及電話: _____

Tel (Home) _____ Person & Tel to contact in case of emergency _____

父親姓名: _____ 工作電話或手機: _____ E-mail: _____

Father's name _____ work/cell phone _____

母親姓名: _____ 工作電話或手機: _____ E-mail: _____

Mother's name _____ work/cell phone _____

參加期別 (Participation Sessions):

___ Session 1 (7/10-7/17, \$420)

___ Session 3 (7/31-8/11, \$440)

___ Session 2(7/17-7/28, \$440)

___ Session 4 (8/14-8/25, \$440)

___ Session 5 (8/28-9/1, \$250)

Fees: Registration fee **\$50** + Tuition \$ _____ = \$ _____

Please make check payable to: **NEW ENGLAND INSTITUTE OF EDUCATIO (neie)**

Parent's Statement:

In the event of an emergency, if the parent/emergency contact cannot be immediately reached, I authorize school officials to administer first aid, take my child to a physician or hospital for emergency treatment, and/or take any other necessary precautionary measures to ensure the safety and well-being of my child. I understand that New England Institute of Education will take full measures to protect my child to the best of their capabilities, and as such, I will not hold the school or its staff liable. Furthermore, I recognize that any charges incurred to ensure the security of my child will summarily be my responsibility as the parent.

I hereby certify that the information is complete and accurate.

Signed by _____ Date _____