## VicCAC 34<sup>th</sup> Church Retreat – Nanaimo Application 域多利華人宣道會 第 34 屆教會退修會 – 乃磨堂報名表

April 28<sup>th</sup> – 30<sup>th</sup>, 2017

	Person	al Information	個人貧	料				
Last Name :	Mr. / Mrs. / Mis	ss. / Ms.						
First Name :	中文姓名:							
Address 地址: _					_			
Phone 電話:		Email 電郵	郵:					
	Religion 宗教 :							
Care Card Numb	er 醫療卡號碼:							
Language 語言:	廣東話 🗌	普通話 🗌		English				
I'd like to volunteer to serve children ministry 我願意參與本屆退修會的兒童事工事奉								
	Famil	y Information	家庭資	料				
	English Name 英文名	Chinese Name 中文名	Age 年 龄	Gender 性 別	Care Card Number 醫療卡號碼			
Spouse 配偶								
Children子女	1.							
	2.							
	3.							
	4.							
	5.							
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	Addition	nal Information	1 划77170	<b></b> 利				
Important :	Please indicate food a	llergy, if any						
請注意	如有食物過敏,請在	此列明						

Retreat Fees 営費										
Day Trip on April 29 週六一日 Adult (12 and above)		\$45	X		\$					
Three Days Two Nights 三天兩夜 Adult (12 and above)		\$125	X		\$					
Senior (65+)	長者 (65 歲或以上)	\$100	X		\$					
Child (age 5 - 11)	兒童 (5-11 歲)	\$80	X		\$					
Family* (under age 11) Family** (under age 19)	家庭* 家庭**	\$305 \$355	X X		\$ \$					
Pacific Woods Lodge (Minimum 6 people per room)	新翼 (每房約六人)	\$12 each	X		\$					
Archery 射箭 Kayaking 划艇 (Can only play maximum one hour on	\$5 each x\$									
* Family with oldest minor under 11 ** Dependent minor aged under 19 (living at home & studying full time) *父母及其 11 歲以下未獨立之子女 **父母及其 19 歲以下未獨立之子女 (與父母同住且是全職學生)  Cancellation Policy 取消及退款										
On or before April 9, cancellation penalty is \$15. No refund after April 9. Retreat fees are non-transferable. 4 月 9 日或以前取消者,取消費用為\$15,4 月 9 日以後取消者,沒有退款。營費不能轉讓與他人。										
Consent Form (Age under 19) 同意表 (19歲以下)										
Consent Form For Single Participant under the Age of 19										
$I \underline{\hspace{1cm}} (Parent/Legal~Guardian's~name), give \underline{\hspace{1cm}} (Minor's~name)~permission~to~attend~the~34^{th}~annual~retreat~of~Victoria~Chinese~Alliance~Church~from~April~28^{th}~-~30^{th}~,~2017~at~Camp~Qwanoes.$										
I consent to authorize the Church Retreat Committee to phone for an ambulance in case of an accident or illness if I cannot be reached immediately.										
I waive and release any and all rights or claims to damages of any loss of property or injuries that										
(Minor's name) may sustain during the retreat.										
	Date:									
Signature of Witness:			Date:							
Authorization 授權										
I authorize Victoria Chinese Alliance Church to use any image or video of the applicants for church related activities. 本人授權域多利華人宣道會使用申請表上所有申請人的任何圖像或視頻作教會有關的用途.										
Signature of Applicant:	Date:									