

## 2020年第十八届明朗中文夏令营(Wayne)注册表

# 18<sup>th</sup> Annual Main Line Chinese Culture Center's Chinese Summer Camp in <u>Wayne</u> Registration Form (For children ages 3 to 13 years old, must be potty-trained)

学生信息(Student General Information)

姓名	中文姓名:	出生年月	(Birth Year & Month):	年龄(Age):				
(Name)	English Name:		年级(Grade <b>in Sep. 2020</b> ):	性别(Gender):				
Prior knowledge of Mandarin is not necessary but new families please state child's Mandarin ability (if any) on the back. This helps us to teach. $\rightarrow$								
父母姓名 (Parents' Names):								
家庭住址 (Home Address):								
工作电话 (Work Phone):			Email:					
移动电话1 (Mobile Phone 1):			移动电话2 (Mobile Phone 2):					

注册期目(Sessions) - Please circle your selection(s):

Session	Date	Full Day (8am – 6pm)	3/4 Day (8am – 3:30pm)	Half Day (8am – 1pm)	Tuition		
First Session (2 weeks minus 1 day)	6/22/2020 – 7/2/2020 (no camp 7/3)	\$540	\$481	\$378			
Second Session (2 weeks)	7/6/2020 – 7/17/2020	\$600	\$534	\$420			
Third Session (2 weeks)	7/20/2020 – 7/31/2020	\$600	\$534	\$420			
Fourth Session (2 weeks)	8/3/2020 — 8/14/2020	\$600	\$534	\$420			
Just 1 week during entire summer	Dates	\$360	\$320	\$252			
Whole Summer (7% off included)	All 8 weeks	\$2,176	\$1,937	\$1,523			
Daily Rate	One day	\$75	\$65	\$55			
Subtotal							
Discount (only <b>one</b> of these three discounts can be applied)	10% off for MLCCO 10% off for additional appl 5% off for return ca	□ x 0.90 or □ x 0.90 or □ x 0.95					
Registration Fee (per family)	□ \$50 or □ \$0 (waive	□+\$50 or □+\$0					
Total							
Deposit \$60 per week, \$120 per session, \$480 for whole summer							
Total – Deposit = Balance Due (by June 1, 2020)							

Multiple weeks do not have to be consecutive to receive the session price.

Please complete your registration form and mail it with deposit (check payable to "MLCCC") to:

Main Line Chinese Culture Center, P.O. Box 745, Bryn Mawr, PA 19010

#### **Referral Bonus Policy:**

Referral Bonus: \$25 bonus will be given for each new camper referred (from different family) who registers for at least 2 weeks (new = have not attended any of our camps before). There is no limit on the number of referrals.

www.mlccc.org • info@mlccc.org • 610-909-6094 • 215-490-6074 • Facebook: Main Line Chinese Culture Center

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**NEW Late Pickup Policy:** \$1 per minute late fee will be charged.

**Deposit Policy:** Deposit is fully refundable if withdraw by 4/1/2020. After 4/1/2020, deposit is non-refundable.

#### Policy on Switching Weeks, Changing Pick Up Times, or Adding Weeks (If Space is Available):

Before or on 6/1/2020, no cost to switching weeks, changing pick up times, or adding weeks.

After 6/1/2020, a \$5 fee per child per transaction, for each switch-of-weeks / change-of-pick-up-times (even if for a day) / addition-of-weeks. *Note that policy on reducing number of weeks or withdrawing completely is specified below.* 

#### Policy on Reducing Weeks or Withdrawing Completely:

- If you reduce or withdraw **BY 4/1/2020**, you will receive a full refund of your payment.
- If you reduce or withdraw AFTER 4/1/2020 but BEFORE you start to attend camp, you will receive a refund of your payment minus your deposit.
- If you reduce or withdraw AFTER you start to attend camp, you will receive a prorated refund minus your deposit.

#### **Release of Liability:**

My child is voluntarily participating in the MLCCC activities at United Church Of Christ, 45 Walker Road, Wayne, PA 19087. I hereby waive and discharge MLCCC, United Church of Christ (UCC), its officers, teachers, volunteers, and staff from all liability as result of my child's participation in MLCCC activities at UCC or at any events hosted by or incidental to MLCCC, whether caused by negligence or otherwise, whether resulting in any physical injury, illness or economic loss.

<u>Image/Name Usage Release:</u> I hereby grant MLCCC the right to use my child's name and image for promotional, news, or public relations purposes in print and/or in electronic media.

#### **<u>Authorized Pick-Up Persons in Addition to Parents:</u>**

1.	Name & Relation to Child 2. Name & Relation to Child							
	dical Information: List child's physician Phone							
2.	. In EMERGENCIES REQUIRING IMMEDIATE MEDICAL ATTENTION, I authorize my child to be taken to the nearest hospital emergency room.							
3.	. If your child has medical condition(s) which might require emergency medical care: (1) Describe the condition(s), including allergies, and medications currently taken if any:							
	(2) Signs/symptoms to look for:							
	(3) If signs/symptoms appear, do this:							
To complete your registration, all parents/guardians must have READ the form, FILLED IN where necessary, and SIGN below:  By signing below, I understand and agree to the policies and releases above in this form.								
Pa	ent/Guardian Name Signature Date							