

CHILDREN & YOUTH MINISTRY REGISTRATION FORM 兒童暨青少年事工註冊表格

Valid 有效期: 2022-2023

Father/Guardian 父親/監護人資料	Mother/Guardian 母親/監護人資料
Full Name 姓名: _____	Full Name 姓名: _____
Cell Phone 手機: _____	Cell Phone 手機: _____
Email 電郵地址: _____	Email 電郵地址: _____
Attends FCBCLA 參加羅省一浸? <input type="radio"/> Yes 是 <input type="radio"/> No 否	Attends FCBCLA 參加羅省一浸? <input type="radio"/> Yes 是 <input type="radio"/> No 否

A parent or guardian must be present on the FCBCLA campus for children in our infant through P4 (4-year-old) classes. 嬰兒至四歲的班別必須有一位家長或監護人陪同參加。

Family Information 家庭資料
Address 地址: _____
City 城市: _____ State 州: _____ Zip 郵區號碼: _____
Primary Language: <input type="radio"/> English 英語 <input type="radio"/> Cantonese 廣東話 <input type="radio"/> Mandarin 普通話 <input type="radio"/> Other: _____ 在家常用的語言

Additional Emergency Contacts 附加緊急聯絡人資料		
If parents/guardians cannot be reached, emergency contacts (18+ years old) will be used as needed. 如未能聯絡到家長/監護人，請致電以下聯絡人。聯絡人必須是十八歲或以上。		
Full Name 姓名	Cell Phone 手機	Relation to Child 與兒童的關係
Full Name 姓名	Cell Phone 手機	Relation to Child 與兒童的關係

Authorized Adult 授權者資料		
Fill out this section for an adult authorized by the parent(s) to drop off/pick up the child(ren). 父母授權以下成人接送他們的兒女到教會，請填這部分。		
Full Name 姓名	Cell Phone 手機	Relation to Child 與兒童的關係
Signature of Authorized Adult 授權者的簽名	Printed Name of Authorized Adult 用正楷寫授權者的姓名	Date 日期

CONTINUE ON THE OTHER SIDE 在另一邊繼續 →

Child Information 子女資料

First Name 名字: _____ Last Name 姓氏: _____

Nickname 別名: _____ Gender 性別: M 男 F 女 Birthday 出生日期: ____/____/____

Child Grade 兒童的年級:

- Inf 嬰兒 T1 (18+ mo) T2 (9/19-8/20)
 P3 (9/18-8/19) P4 (9/17-8/18) K 稚園
 1st 2nd 3rd 4th 5th

Youth Grade 青少年的年級:

- 6th 7th 8th 9th 10th 11th 12th

Cell Phone 手機: _____

Email 電郵地址: _____

Child Medical Information 子女醫療資料

Allergies, Medical Conditions, Special Needs (e.g., peanuts, asthma, diabetes, ADHD, autism; *if none, write "None"*) 敏感症, 醫療狀況, 特別病症 (例如: 哮喘, 糖尿病, 過動症, 自閉症; 若沒有請寫上「無」)

Medications (*if none, write "None"*) 列出你子女現服食的藥物 (若沒有請寫上「無」)

Disclosures & Releases 授權

SUPERVISION DISCLOSURE: Supervision of minors begins 15 minutes before the start of the First Chinese Baptist Church, Los Angeles ("FCBCLA") activity and ends 15 minutes after the stated end time of the activity.

監管授權書: 羅省第一華人浸信會(「羅省一浸」)只在活動前15分鐘及活動結束後15分鐘看顧兒童。

PHOTO DISCLOSURE: I understand that photos of my minor(s) may be used without compensation for FCBCLA's publicity promotions. Use of these photos may include but are not exclusive to printed brochures and FCBCLA's website.

使用照片授權書: 本人明白本人兒女的照片可能會被羅省一浸使用作宣傳用途, 包括照片刊登在羅省一浸刊物及網站。

COMMUNICATION RELEASE: I understand that FCBCLA uses the contact information I give to communicate with parents. By giving this information, I agree to receive such communications from FCBCLA.

溝通授權書: 本人明白羅省一浸使用本人提供的資料與家長聯絡。本人同意羅省一浸與我聯絡。

EMERGENCY MEDICAL RELEASE: FCBCLA is not a medical treatment facility. Teachers, assistants, and staff are not medically trained practitioners. If my child(ren) need(s) medical treatment while participating in these FCBCLA activities, I give the adult in charge permission on my behalf to secure hospitalization or medical services deemed necessary by the physician. I absolve FCBCLA and its personnel from any and all forms of negligence and wrong treatment incurred in the procurement and process of hospitalization and medical treatment. I understand that FCBCLA has no medical insurance, and any medical costs shall be my sole responsibility.

醫療授權書: 羅省一浸並非醫務所。老師、助教及同工也沒有接受醫療訓練。如我的兒女在參加羅省一浸活動時需要接受治療, 本人茲授權此次活動中之成人負責人, 按照醫生之判斷, 為小兒/女選擇醫院、醫療服務, 並進行必須及適當之醫療措施。如有任何疏忽和出錯, 一切後果與羅省一浸及負責人無關。本人明白羅省一浸沒有購買醫藥保險, 故一切醫療費用, 一概由本人獨力承擔。

PERMISSION RELEASE: I give my child(ren) named above permission to attend FCBCLA. My signature indicates my understanding and acceptance of the above disclosures and releases. This is applicable to any FCBCLA program that my child(ren) attend(s), including special programs.

授權書: 我准許我以上名字的兒女參加羅省一浸。我的簽名表示我明白, 並接受監管, 使用照片, 溝通及醫療授權書。此授權適用於羅省一浸兒童事工, 包括特別活動。

x _____
Signature of Parent/Guardian
家長或監護人簽名

Printed Name of Parent/Guardian
用正楷寫家長或監護人姓名

Date
日期