



2017 Georgia Buddhist Summer Camp Family or Individual Registration Form

2017 年喬治亞州佛學夏令營家庭與個人報名表格

Camp Site 夏令營地點: Hard Labor Creek State Park, 5 Hard Labor Creek Road, Rutledge, GA 30663.

Date 日期: June 8-11, 2017

Please choose one group per camper: **Adult (A), Youth 13-18 (Y), Children 5-12 (C)**

請各位填上所參加的組別: **成人組(A), 十三至十八歲青少年組(Y), 五至十二歲兒童組(C)**

T-shirt Sizes 營隊 T-恤尺寸: **YS, YM, YL, S, M, L, XL**

**All minors need to be accompanied by an adult 十四歲以下的兒童必須有一位成人陪同參加

Each camp cottage has **two bedrooms and each bedroom has **two double beds**. With **four** people sharing a room/**two** people per bed, the charge per person is **\$80** each. If you prefer not to share the bed, the cost will be **\$160** per person. For early registration received by 4/15/2017, the cost will be \$70/person. The cost includes a camp T-shirt, accommodation, and meals for the entire event.

**每棟營房內有兩間房間, 每間房間內有兩張雙人床。每人收費\$80。若您希望自己享用一張床, 收費將是\$160/人。若在4/15/2017之前報名, 收費為\$70/人。費用包括營隊T-恤、住宿及膳食。

**Due to US regulation, only registered individual can participate in our event. 根據美國法令, 只有已經報名者才能參加這次的活動。

	Last Name 中英文姓	First Name 中英文名	Age 年齡	Group 組別 A,Y,C	Gender 性別	T-Shirt Size 營隊T-恤尺寸	Telephone 電話號碼	E-mail 電郵
1								
2								
3								
4								
Address 住址								
Emergency Contact 緊急聯絡人						Relationship 關係		
Telephone(s) 電話號碼								
Please list any issues or concerns for all campers (e.g. phobias, medical condition, allergies, etc.) 請註明各位營友需要注意之事項 (例如醫療狀況, 敏感症狀等)								

The liability statement. While every effort will be made to ensure an enjoyable camp, each camp participant shall assume their own responsibility for illness, lost items, or accidents during the period of this camp. Camp organizers cannot be responsible for any claimed damages.

責任條款聲明: 為確保此次夏令營愉快進行, 每位參加者本人必須在營隊內負責自身之健康, 避免發生任何之意外並保管好自己之財物, 主辦單位既不負責任何以上及一切之損傷、損壞及損失。

I (本人), _____ have read the above liability statement and agree with the statement (已閱讀並同意以上之責任條款)。

Signature 簽名: _____

Number of people (人數) _____ x \$80 each = \$ _____

Please accept an additional tax deductible contribution in the amount of 現附上免稅捐款 \$ _____

Check No. 支票號碼 # _____ Total Amount Enclosed 總數 \$ _____

Please mail this form with check payable to **Georgia Buddhist Summer Camp** to the following address:

請將報名表格與支票抬頭 **Georgia Buddhist Summer Camp** 郵寄至以下地址:

Georgia Buddhist Summer Camp
c/o Ivan Lim – 920 Prestonwood Dr., Lawrenceville, GA 30043.

Please read the flyer before applying. Space is limited, so please send your application earlier to ensure a spot!

請申請前先參考宣傳單張。由於參加人數有限, 為免向隅, 請儘早將表格寄出!

Applicant (Parent/Guardian) Signature 申請人 (家長/監護人) 簽名: _____ Date 日期: _____