

# OCCA Homework Club Registration Form

Please offer the students full name, the same as their name on their Birth Certificate. 请提供学生的出生证上的全名。

Student 1 Name 学生 1 全名: \_\_\_\_\_

Gender 性别: Male 男 \_\_\_\_\_ Female 女 \_\_\_\_\_

Date of Birth (YY/MM/DD) 出生年月 (年/月/日): \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Care Card Number 医疗卡号码: \_\_\_\_\_

Allergy 过敏史: \_\_\_\_\_

Does this student have any medical issue that OCCA should be aware of?

有无其他 OCCA 需要注意的医疗事项?

Yes 有 \_\_\_\_\_ No 没有 \_\_\_\_\_

If you checked “Yes” above, please give us the detail.

如果有, 请列出详细内容。

Student 2 Name 学生 2 全名: \_\_\_\_\_

Gender 性别: Male 男 \_\_\_\_\_ Female 女 \_\_\_\_\_

Date of Birth (YY/MM/DD) 出生年月 (年/月/日): \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Care Card Number 医疗卡号码: \_\_\_\_\_

Allergy 过敏史: \_\_\_\_\_

Does this student have any medical issue that OCCA should be aware of?

有无其他 OCCA 需要注意的医疗事项？

Yes 有 \_\_\_\_\_ No 没有 \_\_\_\_\_

If you checked “Yes” above, please give us the detail.

如果有，请列出详细内容。

Student 3 Name 学生 3 全名: \_\_\_\_\_

Gender 性别: Male 男 \_\_\_\_\_ Female 女 \_\_\_\_\_

Date of Birth (YY/MM/DD) 出生年月 (年/月/日): \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Care Card Number 医疗卡号码: \_\_\_\_\_

Allergy 过敏史: \_\_\_\_\_

Does this student have any medical issue that OCCA should be aware of?

有无其他 OCCA 需要注意的医疗事项？

Yes 有 \_\_\_\_\_ No 没有 \_\_\_\_\_

If you checked “Yes” above, please give us the detail.

如果有，请列出详细内容。

More students, please list them below: 如有其他学生，请在下面列出详细内容。

Parent/Guardian: I certify that I am the parent or legal guardian of the participant named above and that I am entitled to his or her custody and control. I understand the aforesaid inherent risks (including the risk of possible exposure to the COVID-19 virus or other infections or infectious diseases) that could arise from these activities, I grant permission for my son/daughter/ward to participate in all the activities at OCCA Homework Club and I have full confidence that reasonable precautions will be taken to ensure the safety and well-being of myself (or my son/daughter/ward).

家长/监护人：我证明我是上述参与学生的家长或法定监护人，我有权获得他/她的监护权和控制权。我了解这些活动可能产生的固有风险（包括可能接触 COVID-19 病毒或其他传染病的风险）。我同意我的儿子/女儿/被监护人参加在 OCCA 课后活动中心，我完全相信将采取合理的预防措施来确保我自己（或我儿子/女儿/被监护人）的安全。

Parent/Guardian Name(s): \_\_\_\_\_

Date (D/M/Y): \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**Parent/Guardian Information: 家长/监护人信息：**

Parent/Guardian 1 Full Name: 家长/监护人 1 全名：\_\_\_\_\_

Home Address: 家庭住址：\_\_\_\_\_

Postal Code: 邮编：\_\_\_\_\_

Email: 电子邮箱：\_\_\_\_\_

Cellphone: 手机号码：\_\_\_\_\_

Parent/Guardian 2 Full Name: 家长/监护人 2 全名 : \_\_\_\_\_

Email: 电子邮箱 : \_\_\_\_\_

Cellphone: 手机号码 : \_\_\_\_\_

Medical Contact Information: 医疗信息 :

Family Doctor's Name: 家庭医生姓名 : \_\_\_\_\_

Doctor's Phone: 家庭医生电话 : \_\_\_\_\_

Emergency Contact Name: 紧急联系人姓名 \_\_\_\_\_ (The person to contact in case of accident or emergency, if parents are not available 在紧急情况下, 如果联系不到家长时使用)

Emergency Phone: 紧急联系人电话 : \_\_\_\_\_

Relationship to Parent: 与家长的关系 : \_\_\_\_\_

Do you give your permission to OCCA use your child/children photographs/videos taken while participating in OCCA Homework Club activities for the purpose of promoting on their website and any and all manner of media) without payment of any fee or charges.

你是否允许 OCCA 在 OCCA 网站上或者其他网站上, 免费使用您孩子参加活动的照片或者录像? (请在横线上打勾)

Yes: 是的 \_\_\_\_\_

No: 不 \_\_\_\_\_

As the legal parent/guardian of the child/children listed on page 1-3, I certify that all the above information is true and complete.

作为前面 3 页所填信息的小孩家长/法定监护人，我保证以上信息完整且属实。

Parent/Guardian Full Name(s): 家长/监护人全名：\_\_\_\_\_

Parent/Guardian Signature(s): 家长/监护人签字：\_\_\_\_\_

Date (D/M/Y): \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Optional: ( 选择填写项目 )

Please offer the school name and the grade of your child/children:

请提供您小孩的学校名称及年级:

\_\_\_\_\_

Please check which days of the week your child/children will participate in?

请勾选一周中哪几天您的小孩会参与我们的活动？

Monday 周一\_\_\_\_\_ Tuesday 周二\_\_\_\_\_ Wednesday 周三\_\_\_\_\_

Thursday 周四\_\_\_\_\_ Friday 周五\_\_\_\_\_ Saturday 周六\_\_\_\_\_

Sunday 周日\_\_\_\_\_

Please check which days of the week your child/children need a ride?

请勾选一周中哪几天您的小孩需要我们帮忙找人接送？

	Mon 周一	Tues 周二	Wed 周三	Thur 周四	Fri 周五	Sat 周六	Sun 周日
Picking Up 接							
Sending To Home 送							

If any days your child/children need to be picked up, please leave the address below.

如果您的孩子需要我们帮忙找人接送，请留下接送地址。

Picking : 接 :

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Sending : 送 :

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