



3rd Dharma Junior Overseas Camp: *Camp Gratitude*

亲子感恩露营会 2018

30th November to 2nd December 2018

Registration Form 报名表格

Part 1: Student's Particulars		
Name 姓名 (as in I/C or passport):	NRIC / Birth Certificate No 身份证号 码:	D.O.B 出生日期 (dd/mm/yyyy): Gender 性别: *Male 男 / Female 女
Part 2: Particulars of Parent/ Guardian 1 家长一的资料		
Name 姓名 (as in I/C or passport): *Mr/Mrs/Mdm/Ms/Dr :	Mandarin Name 中文名:	D.O.B 出生日期 (dd/mm/yyyy): Gender 性别: *Male 男 / Female 女
Home Address 住家地址:		
Home Telephone 住宅电话:	Handphone 手机:	NRIC/Passport No 身份证/护照号码:
Email 电子邮件:	Relationship to child 与孩子的关系:	Occupation 职业:
Part 3: Particulars of Parent/ Guardian 2 家长二的资料		
Name 姓名 (as in I/C or passport): *Mr/Mrs/Mdm/Ms/Dr :	Mandarin Name 中文名:	D.O.B 出生日期 (dd/mm/yyyy): Gender 性别: *Male 男 / Female 女
Home Address 住家地址:		
Home Telephone 住宅电话:	Handphone 手机:	NRIC/Passport No 身份证/护照号码:
Email 电子邮件:	Relationship to child 与孩子的关系:	Occupation 职业:
Part 4: Other Information 其他资料		
Do you have any medical history or food allergy? 您有任何医药病历或对某食物产生敏感吗? Yes 是 <input type="checkbox"/> No 否 <input type="checkbox"/>		
If yes, please specify 如有, 请注明: _____		

Part 5 : Parent's Consent 家长同意 (For participants under 18 years old 十八岁以下的参与者)

I, (Name of parent) _____ (NRIC : _____), * parent / guardian of _____ (Name of *child/ward), hereby give consent for my *child/ ward to attend the above mentioned event. I understand that I shall not hold Thekchen Choling (Singapore), their staff and/or the organizing members responsible in the event of any damage or loss of properties, mishaps, injury or loss of life that may occur during or arising from the above mentioned event.

Signature of *Parent/Guardian 签名

Date 日期

*Please delete where appropriate

Part 6 : Indemnity & Personal Data Protection Consent 免责条款与个人资料隐私授权

1) I understand that I shall not hold Thekchen Choling (Singapore), the staff and/or the organizing members responsible in the event of any damage or loss of properties, mishaps, injury or loss of life that may occur during or arising from the above mentioned event. 我明白及同意大乘禅寺(新加坡), 工作人员与主办人员将无须赔偿或负起任何有关我在闭关时所发生的任何损失, 遗失任何财物, 意外, 伤害或丧命等。

2) I agree and consent that the personal data I am requested to provide in the forms are collected by Thekchen Choling (Singapore) for purposes of registration, event publicity, marketing communications, audit, and meeting any other legal and regulatory obligations, and may be used, disclosed or otherwise processed accordingly. I consent to get my image (photograph or video image) to be taken during the retreat and used subsequently by TCCL for marketing purposes. The personal data enclosed herein may be used by Thekchen Choling may be transferred by TCCL SG to its other affiliates and branches worldwide on a required basis. 我同意将我在报名表格上的个人资料让新加坡大乘禅寺需要时用于报名, 宣传, 会计与符合法律要求的用途。我也同意让大乘禅寺在活动期间拍摄本人的照片与影像为宣传用途。我同意将我在报名表格上的个人资料在有需要时转给于新加坡大乘禅寺与其它分支机构。

Yes, I agree 是, 我答应

No, I do not agree 否, 我不答应

Signature 签名

Date 日期

Part 7 : Ticket Price 票价 (Registration closes on 31st October 2018 报名于10月31日截止。)

***Free Of Charge for child age 4 to 12 years old**
儿童 4 至 12 岁免费

Each child must be accompanied by at least one adult family member (Max up to 2 adults).

1 adult 成人一位 S\$60

2 adults 成人 2 位 S\$120

**Special gratitude to our kind sponsors for supporting the camp*

- 3-Night Dormitory lodging at Kota Tinggi Retreat Centre
- 2 way Coach Transport to & from Singapore to Kota Tinggi
- All Meals provided
- 晚宿舍式住宿
- 包括来回新加坡与哥打丁宜的巴士接送服务
- 露营会期间所有膳食

Crossed cheques are to be made payable to 请将划线支票注明: "**Thekchen Choling (Singapore)**"

Please attached the cheque together with your registration form and mail it to:

请将支票与参加表格寄至: **2 Beatty Lane Singapore 209945**

FOR OFFICIAL USE 寺务所专用:

Amount : _____ Receipt No. : _____ Date of registration: _____

Payment Mode : Cash / Nets / Visa / Cheque (Bank/Chq No.) : _____