



波士頓慈濟人文學校報名表清單

2022-2023

- 報名表
Registration Form

- 慈濟人文學校就醫暨授權書
Release of Liability and Assumption Risk Agreement

- 媒體發佈家長授權書
Parent/Guardian Media Release Authorization



波士頓慈濟人文學校報名表

Tzu Chi Academy, Boston 2022-2023 Registration Form

新生 New student 舊生 Returning student

一、學生資料 Student Information

中文姓名 Chinese Name	英文姓名 English Name	生日 Birthday	性別 Gender	年級 Grade	制服 Uniform Size	學費 Tuition

Please make check payable to: **Tzu Chi Academy**. Mail to: Tzu Chi Academy, Registration Department, 15 Summer St, Newton, MA 02464. Tel: (617) 762-0569. For more information, please visit www.tzuchiacademyboston.org

二、監護人資料 Parent or Legal Guardian information

監護人關係 Relationship	中文姓名 Chinese Name	英文姓名 English Name	C: Cellular Phone 行動電話 O: Office Phone 辦公室電話
			C: O:
			C: O:

三、家庭、聯絡人及健康保險資料 Family Emergency Contact and General Health Information

學生住址 Address: <small>street</small> _____ <small>apt#</small> _____ <small>city</small> _____ <small>state</small> _____ <small>zip</small> _____	
住家電話 Home phone: _____	電郵 Email: _____

1. 姓名 (Contact #1 Name): _____ 電話 (Tel): _____

2. 姓名 (Contact #2 Name): _____ 電話 (Tel): _____

家庭醫生 (Family Doctor): _____ 電話 (Tel): _____

保險公司 (Insurance Company): _____

特殊健康關照 (Special Medical Attention): _____

虛線以下為學校填寫專用 Official use only

	<input type="checkbox"/> 全學年 \$520	<input type="checkbox"/> 註冊費 \$30	<input type="checkbox"/> 制服
學費	<input type="checkbox"/> 未付 <input type="checkbox"/> 現金\$ _____ <input type="checkbox"/> 支票\$ _____, ck# _____ 付費日期: _____	<input type="checkbox"/> 未付 <input type="checkbox"/> 現金\$ _____ <input type="checkbox"/> 支票\$ _____, ck# _____ 付費日期: _____	<input type="checkbox"/> 未付 <input type="checkbox"/> 現金\$ _____ <input type="checkbox"/> 支票\$ _____, ck# _____ 短袖 <input type="checkbox"/> 大 <input type="checkbox"/> 中 <input type="checkbox"/> 小 長袖 <input type="checkbox"/> 大 <input type="checkbox"/> 中 <input type="checkbox"/> 小
備註			

2022/2023 年免責任就醫授權書

Medical Release Form

假如發生意外事故並且人文學校聯絡不到您，請將兩位可以代您關照而且替您的小孩負責就醫的親戚或朋友的名字寫出來。
Should your child be hurt in an accident and we are unable to contact you, please list the names of two individuals who will take responsibility in seeking medical attention.

1. 姓名(Name) : _____ 電話(Tel) : _____

2. 姓名(Name) : _____ 電話(Tel) : _____

3. 家庭醫生(Doctor) : _____ 電話(Tel) : _____

倘若您所填的資料有任何變更，請儘快通知人文學校，假設發生意外事故而且人文學校不但聯絡不到父母親，也無法聯絡到父母親所指定的其他負責人，則人文學校有權替學生採取緊急就醫措施，學生家長不能有任何的異議。

Should there be any changes in the above information, please inform the school immediately. If the Tzu-Chi Academy is unable to contact both the students' parents and those persons designated above, it has the authority to seek medical attention for the student with no objection from the student's parents.

RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT

- I, hereby acknowledge that I have voluntarily applied for my child, _____, to participate in all activities to be conducted by THE TZU-CHI ACADEMY ("TCA"). In consideration of being permitted to participate in TCA Activities, I agree, for my child, myself, and for my heirs, successors, assigns, and personal representatives, to assume all the risks and responsibilities surrounding my child's participation in all TCA Activities and, to the maximum extent permitted by law, release and agree to indemnify TCA and its officers, chaperons, teachers, volunteers, employees, and other persons associated with TCA from and against any and all claims, demands, losses, defense costs or liability of any kind or nature which the TCA, its officers, chaperons, teachers, volunteers, employees and other persons associated with TCA may sustain or incur or which may be imposed upon them for injury to person (including injuries resulting in bodily injury, illness or death) or property which my child may suffer, or for which my child or I may be liable to any other person during my child's participation in the TCA Activities, including any claim for damages based on the alleged negligent acts or omissions of TCA. I further agree not to sue or otherwise assert any claim against TCA arising out of or in connection with my child's participation in TCA Activities, specifically waiving my right to sue for any claim, demand or cause of action heretofore released.
- I certify that my child has the necessary skills and abilities to participate in all TCA activities and I assume full responsibility for body injury, and loss of personal property, and expenses thereof as a result of my child's negligence in participating in TCA activities. I also agree to instruct my child to abide by the rules or instructions given to them either verbally or in writing by TCA. I further understand that TCA reserves the right to refuse any person judged to be physically or mentally unfit to meet the rigors and requirements of participating in certain activities. I also agree that TCA may use video or photographic or audio records of the activities that my child has participated in for promotional purposes.
- I also agree that in the event of illness or accident of my child, any TCA officers, chaperons, teachers, volunteers, employees and other persons associated with TCA, in whose care my child has been entrusted, is authorized to consent to an X-ray examination, anesthetic, medical or surgical diagnosis of my child; to transportation of my child to any hospital and to treatment and hospital care to be rendered to my child under the general or special supervision and upon the advice of a licensed physician and/or surgeon. I hereby indemnify, discharge and hold harmless TCA, its officers, chaperons, teachers, volunteers, employees and other persons associated with TCA from liability because of the exercise of such actions.

Signature of Parent or Legal Guardian: _____ Date: _____

家長簽名

日期

2022/2023 School Year

PARENT/GUARDIAN MEDIA RELEASE AUTHORIZATION

Buddhist Tzu Chi Foundation, U.S.A. requests permission to reproduce, through audio or visual means, activities related your student's education. Your signature below will enable us to increase public awareness and promote continuation and improvement of educational programs through mass media, displays, brochures, etc.

The media mentioned herein include but are not limited to photographs, films, slides, internet, video, and audio tape recordings.

GRANTING OF PERMISSION IS VOLUNTARY AND SHALL REMIAN IN EFFECT THROUGH THE CURRENT SCHOOL YEAR ONLY.

Student's Name _____

Date of Birth _____

Class _____

I hereby give my permission:

Parent (or Guardian) Signature: _____

Name (Print): _____

Relationship to Student: _____

Date _____

備註 Remarks

I. 語文課程 Language Class: 9:30am-10:20am, 10:30am-11:20am

幼中班 Kindergarten II, 幼大班 Kindergarten III, 一至九年級 1st to 9th grade

II. 人文課程 Humanity & Culture Extracurricular Class: 11:30am-12:20pm

多元化的人文課程包括大愛引航靜思語教學、環保課程、素食教學、創作舞蹈、扯鈴、羽球、棋藝、民俗藝術、茶道、花道等。

III. 學費及退費辦法 Tuition and Refund Policy

1. **學費**：包括教材費、學雜費及人文課程費。一學年學雜書籍費\$520，加註冊費\$30，註冊費恕不退費。
舊生 6/5/2022 前早註冊者每位學生有\$20 折扣。新生於 7/31/2021 前早註冊者每位學生有\$20 折扣。

Tuition and fees: \$520 annual tuition (two semesters), books, and miscellaneous fees, plus registration fee \$30 per student.

The existing students will receive \$20 discount if registered before 6/5/2022. **New students will receive \$20 discount if registered before 7/31/2022.**

2. **制服費**：每位學生每兩年可免費索取長袖制服或短袖制服一件。額外制服十五元一件。

Uniform costs: Each student can request a long-sleeve or a short-sleeve uniform free of charge every two years. Additional uniform can be purchased with \$15 each.

3. **退費辦法**：註冊費 恕不退費。開學日之前申請退費，學雜書籍費全額退還。開學日後三十天之內申請退費，退學雜書籍費之 75%，之後不再退費。

Tuition refund policy:

·Refund request made before the first class will receive full refund of the tuition. Registration fee is non-refundable.

· Refund request made within 30 days after school starts will receive 75% of tuition paid. Registration fee is non-refundable.

· Refund request received after the first month will receive NO REFUND.