**City Vancouver Academy – 2024 Summer Camp**

**温哥华城市学院-2024夏令营**

**Summer Camp Agreement-2024 夏令营报名协议**

*Insert*

*Photo*

*Here*

**Please submit a completed application to:**

**请阁下将填写好的申请表E-mail或 邮寄至**

**For Office Use Only 招生办内部人员填写：**

Student group \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grade \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**以下地址**：

1. **E-mail:** camp@cityvanacademy.ca
2. **地址：**

City Vancouver Academy

c/o Summer Camp Program

300-5900 No 3 Road

Richmond, BC, Canada V6X 3P7

**PLEASE PRINT CLEARLY IN ENGLISH*. Translated application forms are provided for the easy reference of applicants. City Vancouver Academy always follows the policies and definitions as stated in the English version of application form***

**请用规范的英语填写表格。** *为了让家长们放心本校也提供译成中文的申请表给予便利。温哥华城市学院时刻遵从本校的规章与制度。感谢家长与同学给予的合作与支持。*

**STUDENT INFORMATION 申请学生的基本资料**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \*Gender**性别:** Female**女**Male**男** Other**其他**

\*Surname **姓** \*Given Name**名字** English Name **英文名**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Date of Birth (mm/dd /yy) \*Phone Number \*E-mail address

**出生日期 (月/日/年） 移动电话 E-mail邮箱**

Visa Expiry Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**签证过期日期** (mm /dd /yy) **月/日/年**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Current Local Address **目前居住地址** Street Address **街道** City  **城市**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Province **省** Country **国家** Postal Code **邮编**

**PARENT INFORMATION 学生父母的基本资料**

\*Father: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \*Mother: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**父亲**  Family Name**姓** Given Name **名字** **母亲** Family Name **姓** Given Name **名字**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Permanent Address (in Home Country) **长期居住地址**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Province **省** Country **国家** Postal Code **邮编**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Cellular phone（Father）**父亲手机** \*Cellular phone（Mother）**母亲手机** Home Telephone **家固定电话**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \***Are they EMERGENCY contacts?**  Yes No E-mail address (Father) **父亲电子邮箱** E-mail address (Mother) **母亲电子邮箱** **将他们列为紧急联系人**? **是 否**

1

1

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  WeChat ID (Father) **父亲微信**  WeChat ID (Mother) **母亲微信**

**APPOINTMENT CUSTODIAN / GUARDIAN 监护人委托书**

My child will live with the custodian of the following person who is a Canadian Citizen or landed immigrant and is over the age of 25. **我的孩子将会和以下的监护人(加拿大25岁以上成年本地公民/居民)一起居住.**

\*Family Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \*First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**姓 名字**

\*Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**关系 邮箱**

\*Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**地址**

Phone (Home): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \*Phone (Business): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**电话（家庭） 电话 （工作/手机）**

**\*Is this EMERGENCY contact?** Yes No

1

1

**将他/她列为紧急联系人**? **是 否**

**PARENT CONSENT 家长同意条例**

**\*Release of Information 信息发布**

I give permission for my child’s name, photograph and video to be used as it related to the production of a school play or concert, a school event or promotion of City Vancouver Academy.

**我同意给温哥华城市学院使用含有我孩子的名字 或 人物照片 或视频等能用于学校的活动或音乐会以及学校的宣传. (同意自己的孩子名字或者相片可能会出现在学校的宣传册,网站或者学校组织的活动)**   是Yes  否No

Protecting Your Personal Information: City Vancouver Academy collects and uses personal information for the sole purpose of maintaining accurate student records in the administrative offices, and to respond immediately to an emergency. City Vancouver Academy commits to using and storing this information responsibly and will not release this information to a third party without your verbal or written consent unless permitted under the PIPA (Personal Information Privacy Act) legislation. If you have questions about City Vancouver Academy’s use, storage or disclosure of personal information, please contact our privacy officer (the school principal).

**为了保护您的个人资料: 温哥华城市学院收集和使用个人资料目的是来用于维护招生办公室的学生档案的准确性,并用于紧急情况. 温哥华城市学院将会小心并负责地存储这些信息. 除非在PIPA （个人资料隐私法）的法律允许下,没有您的口头或书面同意温哥华城市学院是不会公布这些资料给第三方.** **如果您对温哥华市学院的使用,存储或怀疑您的个人资料泄露，请联系我们的个人隐私负责人（校长） 。**

I/we consent to having City Vancouver Academy collect, use and disclose this personal information as outlined above.

**我/我们同意让温哥华城市学院收集，使用和公开上文所述这些个人资料。**

*\*Student/Parent Signature:* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**學生/家长 请在此签名**

**SURVEY 问卷调查**

\*How did you hear about City Vancouver Academy Summer Camp?

**请问您是通过以下什么方式知道温哥华城市学院夏令营？**

Friend/Relative Newspaper/Magazine School Website

**朋友/亲戚 报纸/杂志 报刊名**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **学校网站**

Internet (e.g. Google search) Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Agent / Agency / School

**上网 (e.g. Google, 百度) 其他 中介公司 (人)/学校**

**AGENCY/AGENT/SCHOOL推荐人/中介公司/学校**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Agent/Agency/School Contact Person Business Telephone E-mail address

**中介人/中介公司/学校 联系人 办公电话 电子邮箱**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address of Agent

**中介公司地址**

**HEALTH INFORMATION 健康状况**

All students will be provided a medical insurance through third party.

**在夏令营期间，温哥华城市学院高中会为参加的学生购买私人医疗保险**。

If student is already studying in BC, please provide Care Card number

**如果学生已在BC省内读书， 请填写您的医疗卡的号码：**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does the student have any medical condition (including severe allergies) or take any medication? Yes **是** No **否**

**请问学生有任何健康状况（包括严重性过敏）或正在服用什么药物吗？**

If YES, please describe:

**如果有，请说明： \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Does the student have a perceived or documented learning disability, physical handicap?

**学生是否有，被察觉或被书面告知学习障碍，肢体伤残？**

Yes **是** No **否**

If YES, please describe:

**如果有，请说明： \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Name of family doctor Phone: City/Country:

**家庭医生姓名：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 电话：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 城市/国家：**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CHECKLIST 资料列表**

Application form

**申请表**

Clear photocopy of passport

**清晰的护照复印件**

Copy of custodian declaration (IMM5646)

**监护权声明书**

**City Vancouver Academy High School Graduation Program**

**温哥华城市学院高中毕业课程**

**SUMMER CAMP PROGRAM PARTICIPATION AGREEMENT**

**暑期夏令营课程参与协议**

*Translated application form are provided for the easy reference of applicants. City Vancouver Academy always follows the policies and definitions as stated in the English version of the application forms.*

**为提供申请人阅读时的方便我们提供了中文版申请表格。温哥华城市学院始终遵循申请表格的英文版本上注明的守则和定义。**

City Vancouver Academy wishes to provide a challenging and exciting summer camp program to students. There are, however, certain expectations of students who are accepted into our program. These expectations include important obligations on the part of each student accepted to study at our schools, and we set a high standard in requiring all students to meet their obligations.

**温哥华城市学院希望为学生提供一个具有挑战性和令人兴奋的教学环境。然而，我校在录取学生中也有一定的要求。**

**这些严谨的校规贯彻到每一位学生是我们学校成长学习的重要义务。我们为学生设定了高标准帮助他们走向目标。**

Each student and the custodian or parent(s) of each student that is accepted into City Vancouver Academy high school summer camp program must read the following statement and must, by, signing it, agree to be bound by and to honour its terms strictly.

**每位学生进入温哥华市学院高中暑期夏令营课程必须仔细阅读以下声明，必须，签署，同意受其约束，并严格履行其条款。**

1. **Law, Rules and Regulations**

**法律，法规和规章**

We agree to abide by all laws of Canada, the rules, regulations and policies of City Vancouver Academy which include those pertaining to attendance, homework and behaviour. In particular, understand that the unlawful use of drugs will not be tolerated and that alcohol use is also forbidden in all circumstances. City Vancouver Academy has a firm policy of dismissing students who violate drug and alcohol rules.

**我们同意加拿大所有法律，包括上学出勤，作业完成等行为的法规，规章和温哥华城市学院政策的约束。尤其是，充分意识非法使用药物，酒精 是在任何情况下都禁止的。温哥华城市学院有针对违反毒品和酒精相关政策。**

Students must also show the following:

**学生还必须做到以下几点：**

* Student must provide proof of a current Visa

**学生必须提供当前签证的证明。**

* Student must respect each other，teachers and staff.

**学生必须尊重同学、老师、以及工作人员。**

1. **Educational Needs**

**教育要求**

We agree that City Vancouver Academy reserves the right to：

**我们同意温哥华城市学院保留以下的权利：**

* Make educational decisions, including placement and program decisions, in the best interests of students and within available resources;

**做出教育的决定的权利，其中包括学生安置，课程方案定制，充分利用现有资源保证学生最大的利益。**

* To maintain the health of the student, CVA will withdraw student who show any form of bullying, racism or violence.

**为了保证学生的身心健康，CVA 拥有对有霸凌、种族歧视、或暴力行为的学生，进行强制退学的权利。**

1. **Custodian**

**监护**

We understand that international student aged 18 and younger are not permitted to live independently while enrolled in the program. We agree to appoint a custodian over 25 years of age who will take responsibility for my child and will ensure that his/her accommodation and other living necessities such as food, clothing and transportation are provided. Students must live with a responsible adult who is their custodian or their boarding parent. Throughout the Summer Camp program, student will be living and supervise with CVA staff in the UBC dorm.

**我们知道国际留学生在本校就读期间18岁以及18岁以下是不能独自生活的。我们同意委托一位25岁以上的监护人来负责并照顾学生的衣食住行。学生必须与他们的监护人住在一起。夏令营期间，CVA 老师会监管并与学生共同居住在UBC 宿舍。**

1. **General Release**

**相关条例**

We, the undersigned, do waive and release all claims against City Vancouver Academy for the injury, loss, damage, accident, delay or expense resulting from the applicant’s participation in the High School Summer Camp Program. We also release City Vancouver Academy and agree to indemnify them, with regard to any financial obligations or liabilities that the student may personally insure, or any damage or injury to the person or property of others that the applicant may cause while participating in to High School Summer Camp Program.

**在学生参加暑期夏令营课程中，如果出现受伤，丢失物品，发生事故，未按时完成学业和额外花销的情况，我们签署，也放弃对温哥华市学院的所有索赔。在学生就读高中课程中，如果学生违反校规，损坏公务，损坏他人物品，导致他人受伤，我们同意赔偿温哥华城市学院。**

1. **Refund Policy**

**退款政策**

In the event that an applicant cannot come to Canada or wants to withdraw from City Vancouver Academy Summer Camp, the refund policy will apply. All requests for refund must be made in writing. Please attach the original letter of acceptance and receipt with the request. All documents must be presented to the school to process the refund.

* Any Refund require, please contact your agent for details.

**退款政策适用于在申请人无法前来加拿大或温哥华城市学院夏令营项目。所有退款要求必须以书面形式提出。请附上入学通知书和学费收据的原件。所有文件必须提交给学校。**

* **所有退款申请，请直接联系您的中介。**

I have read the above and agree to fulfill all my obligations as set out. I also agree to the agreement and release clause.

**我已阅读上述并同意履行我的所有义务。我也同意该协议和解除条款。**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Student (Please Print) Student Signature Date

**学生姓名（规范填写） 学生签名 日期**

**I/we, the parents/custodians of the student signing above (‘our child’), have read all the above including the agreement and release clause and I/we agree that we will use our best efforts to ensure that our child honours all the obligations set out and we agree to be bound by the release and authorisations. We certify that the information on this form and attached records is complete, authentic and true. We understand that if this is not the case, this student will be withdrawn from the High School Summer Camp Program.**

**我/我们， /学生的监护人签署上述（ “我们的孩子” ） ，已阅读上述所有协议和解除条款。我/我们同意，我们将尽最大努力，确保我们的孩子会尊重并履行规章制度。我们声明，本入学申请表的内容与并附上文档信息是完整的和真实的。我们知道如果以上是不真实的，学生将会从高中暑期夏令营课程名单中除名。**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Parent / Guardian (Please Print) Parent’s / Guardian’s Signature Date

**家长/監護人 姓名（规范填写） 家长/監護人 签名 日期**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Parent / Guardian (Please Print) Parent’s / Guardian’s Signature Date

**家长/監護人 姓名（规范填写） 家长/監護人 签名 日期**

**Please return the original application from (a total of 8 pages) with all required documents and your application fee to:**

**请讲此入学申请表的原件（共7页）以及所有附带要求的资料和您的注册费递交到：**

*(Please keep a copy if this document for your reference.)*

***（请保留副本，以供参考。 ）***

**City Vancouver Academy**

**300-5900 No 3 Road, Richmond, BC, Canada V6X 3P7**

**Telephone: (1)604-278-6811 Website:** [**www.cityvanacademy.ca**](http://www.cityvanacademy.ca) **E-mail:** [camp@cityvanacademy.ca](mailto:camp@cityvanacademy.ca)