

<p>Please check which program to enroll in:</p> <p><input type="checkbox"/> After School Educational Program Fall ___ Spring ___</p> <p style="padding-left: 20px;"><input type="checkbox"/> JYC Regular <input type="checkbox"/> JYC Reg + Chinese <input type="checkbox"/> JYC ExCEL</p> <p style="padding-left: 20px;"><input type="checkbox"/> CYU (Church) <input type="checkbox"/> Yick Wo <input type="checkbox"/> Spring Valley</p> <p><input type="checkbox"/> Winter Camp <input type="checkbox"/> Spring Camp <input type="checkbox"/> Teen Center</p> <p><input type="checkbox"/> Art Class Time: _____ Level: _____</p> <p><input type="checkbox"/> Ballet Class Time: _____ Level: _____</p>	<p><input type="checkbox"/> Building Futures Mentorship Program</p> <p><input type="checkbox"/> Cultural Camp: 1 2 3 4 5 6 7 Total: _____</p> <p><input type="checkbox"/> Summer School <input type="checkbox"/> Counselor-In-Training <input type="checkbox"/> Summer Volunteer</p> <p>Resident Camp: <input type="checkbox"/> Leadership-in-Training <input type="checkbox"/> Boy's & Girl's Camp</p> <p><input type="checkbox"/> Campference</p> <p><input type="checkbox"/> Other _____</p>
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YOUTH PROGRAM REGISTRATION FORM (青少年活動報名表)

PART A. Participant Information (申請人資料) FOCUS ID #: _____

Last Name(姓): Sex(性別): M(男) F(女)

First Name(名): Middle Initial(中間名縮寫):

Address(地址):

City(城市): Zip Code(郵編):

Home Phone(住宅電話): () - Birthdate(生日): /

Age(年齡): _____ Grade (in the Fall)(級別): _____ School(學校): _____ Primary Language(常用語言): _____

Father/Guardian(父/監護人): _____ Daytime Phone(日間電話): (_____) _____ DOB(生日): _____

Mother/Guardian(母/監護人): _____ Daytime Phone(日間電話): (_____) _____ DOB(生日): _____

PART B. Participant Medical Emergency Information (申請人醫療緊急資料)

Special medical problems(特別醫療問題): _____

Allergies(過敏): _____ Medication(藥物): _____

Name of youth's doctor (青少年的醫師名字) _____ Phone(電話) _____

Address(地址): _____ City(城市): _____ Zip Code(郵編): _____

Hospital Preference(首選醫院) _____ Phone(電話) (_____) _____

Insurance Company(醫療保險公司) _____ Policy #(保單號碼) _____

Dentist(牙醫) _____ Phone(電話) (_____) _____

In case of emergency, please notify (other than Parents/Guardians) 除雙親及監護人之外的緊急聯絡人 :

Name(姓名) _____ Relationship(關係) _____

Home Phone(住宅電話) (_____) _____ Work Phone(工作電話) (_____) _____

Name(姓名) _____ Relationship(關係) _____

Home Phone(住宅電話) (_____) _____ Work Phone(工作電話) (_____) _____

PART C. Release Information/發佈信息 (Must sign back of page/請在背後簽名)

Parent/Guardian Medical Release(家長/監護人醫療發佈)

The undersigned, as parent or guardian of the child registered on this form, hereby authorizes the YMCA and its delegated leaders and directors to consent to any medical and hospital care to be rendered to said minor upon advice of licensed physician. This authorization is given pursuant to the provisions of Section 25.8 of the Civil Code of California. It is understood that if time and circumstances reasonably permit, the YMCA will endeavor, but is not required, to communicate with me prior to treatment.

Signature of Parent or Guardian(家長/監護人簽名): _____ Date(日期): ____/____/____

<p>FOR OFFICE USE ONLY</p> <p>rev. 3/26/10dl</p>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%; text-align: center;">Date</td> <td style="width: 10%; text-align: center;">Amount</td> <td style="width: 10%; text-align: center;">Subsidy</td> <td style="width: 10%; text-align: center;">Deposit</td> <td style="width: 10%; text-align: center;">Balance</td> <td style="width: 10%; text-align: center;">Memb.</td> <td style="width: 10%; text-align: center;">Staff Initial</td> </tr> <tr> <td style="text-align: center;">_____</td> <td style="text-align: center;">\$ _____</td> <td style="text-align: center;">\$ _____</td> <td style="text-align: center;">\$ _____</td> <td style="text-align: center;">\$ _____</td> <td style="text-align: center;">\$ _____</td> <td style="text-align: center;">_____</td> </tr> </table>	Date	Amount	Subsidy	Deposit	Balance	Memb.	Staff Initial	_____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	_____
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_____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	_____									

YMCA of San Francisco Membership Application
Release and Waiver of Liability and Indemnity Agreement

IN CONSIDERATION of being permitted to utilize the facilities, services and programs of the YMCA (or for my children to so participate) for any purpose, including, but not limited to observation or use of facilities or equipment, or participation in any off-site program affiliated with the YMCA, the undersigned, for himself or herself and such participating children and any personal representatives, heirs, and next of kin, hereby acknowledges, agrees and represents that he or she has, or immediately upon entering or participating will, inspect and carefully consider such premises and facilities or the affiliated program. It is further warranted that such entry into the YMCA for observation or use of any facilities or equipment or participation in such affiliated program constitutes an acknowledgment that such premises and all facilities and equipment therein and such affiliated program have been inspected and carefully considered and that the undersigned finds and accepts same as being safe and reasonably suited for the purpose of such observation, use or participation by the undersigned and such children.

IN FURTHER CONSIDERATION OF BEING PERMITTED TO ENTER THE YMCA FOR ANY PURPOSE INCLUDING, BUT NOT LIMITED TO OBSERVATION OR USE OF FACILITIES OR EQUIPMENT, OR PARTICIPATION IN ANY OFF-SITE PROGRAM AFFILIATED WITH THE YMCA, THE UNDERSIGNED HEREBY AGREES TO THE FOLLOWING:

1. THE UNDERSIGNED, ON HIS OR HER BEHALF AND BEHALF OF SUCH CHILDREN, HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE the YMCA, its directors, officers, employees, and agents (hereinafter referred to as "releasees") from all liability to the undersigned or such children and all his personal representatives, assigns, heirs, and next of kin for any loss or damage, and any claim or demands therefor on account of injury to the person or property or resulting in death of the undersigned, whether caused by the negligence of the releasees or otherwise while the undersigned or such children is in, upon, or about the premises or any facilities or equipment therein or participating in any program affiliated with the YMCA.
2. THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the releasees and each of them from any loss, liability, damage or cost they may incur due to the presence of the undersigned or such children in, upon or about the YMCA premises or in any way observing or using any facilities or equipment of the YMCA or participating in any program affiliated with the YMCA whether caused by the negligence of the releasees or otherwise.
3. THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE to the undersigned or such children due to negligence of releasees or otherwise while in, about or upon the premises of the YMCA and/or while using the premises or any facilities or equipment thereon or participating in any program affiliated with the YMCA.
4. THE UNDERSIGNED HEREBY GIVES PERMISSION for the YMCA of San Francisco, or any of its branches, to use any photographs or video footage taken of the undersigned and/or the undersigned's children participating in YMCA of San Francisco activities in future YMCA promotional purposes, without additional release or authorization.

THE UNDERSIGNED further expressly agrees that the foregoing RELEASE, WAIVER AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as is permitted by the law of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agrees that no oral representations, statements or inducement apart from the foregoing written agreement have been made.

I HAVE READ THIS RELEASE(我已經閱讀及明白以上全部條例).

Signature of applicant/parent(監護人/家長簽名): _____ Date(日期): _____

Print name of applicant/parent(監護人/家長寫名): _____

Print name(s) of child(ren) in program(寫貴子弟在本會課程中名): _____