

# Father and Child Day Camp

爸爸與孩子的日營

20 / 03 / 2010

## Registration Form 報名表

**(Note: Payments are non-refundable and non-transferable)**

(注意：所交費用不能退還及不能轉讓)

Name of Father 父親姓名: \_\_\_\_\_

Name of Child 1 孩子 1 姓名: \_\_\_\_\_ School Year 年級: \_\_\_\_\_

Name of Child 2 孩子 2 姓名: \_\_\_\_\_ School Year 年級: \_\_\_\_\_

Name of Child 3 孩子 3 姓名: \_\_\_\_\_ School Year 年級: \_\_\_\_\_

Address 地址: \_\_\_\_\_

Tel 電話: (home 住宅) \_\_\_\_\_ (mobile 手提) \_\_\_\_\_

Email 電郵: \_\_\_\_\_

Emergency Contact Person and Number 緊急聯絡人及電話:

\_\_\_\_\_

Have you participated in any of FLC's events 你曾否參加過晨光舉辦的活動?

No 沒有

Yes, please specify 有，請注明: \_\_\_\_\_

Please specify any food allergies 請填寫對食物敏感之食物種類:

\_\_\_\_\_

**Please return your completed form and payment to: First Light Care Association, P.O. Box, K1012, Haymarket, NSW 1240; Please make cheques to: First Light Care Association Inc.**