



# 美國翰林文教基金會

## Hanlin Education Foundation of America

2090 Warm Springs Court, suite 256, Fremont, CA 94539, USA

Email : [hanlinform@gmail.com](mailto:hanlinform@gmail.com) Phone : (408) 694-7121

### 海外華裔青少年“中国尋根之旅”翰林營 Medical Emergency & Photo Release Waiver Form

Name of student \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

Medical Insurance Carrier \_\_\_\_\_ Policy No. \_\_\_\_\_

Please provide a detailed description of any medical condition of which we should be aware \_\_\_\_\_

DISCLAIMER, ASSUMPTION, OF RISK AND WAIVER: I, the undersigned parent or legal guardian of the above student, a minor, for myself and on behalf of the above student, willingly and voluntarily accept and assume all the risk might be involved in **20 Overseas Chinese Summer Camp in China program.**

( / / 20 ~ / / 20 )

In consideration of accepting the registration and permitting the voluntary participation of the above student in this program, for myself and on behalf of the above student, I hereby release, discharge and agree to hold harmless Chinese Culture and Education Foundation its employees, volunteers, officials, sponsors and other representatives from any and all claims, demands, costs, expenses and compensation arising out of or in any way related to any physical injury or other damage that may result to say student while participating in this program. I hereby authorize and consent to the use of his/her visual image by Hanlin Education Foundation of America for appropriate purposes, including but not limited to: still photography, videotape, electronic and print publications and websites. I give this consent with no claim for payment.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_