

# 2023 Summer Camp Registration Form


## Student Information

Student 1 Name \_\_\_\_\_ Birthdate \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Gender: Boy \_\_\_ Girl \_\_\_  
 Learned Chinese Yes \_\_\_ No \_\_\_ Any Allergies \_\_\_\_\_ Any Condition You Want School Know \_\_\_\_\_  
 Student 2 Name \_\_\_\_\_ Birthdate \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Gender: Boy \_\_\_ Girl \_\_\_  
 Learned Chinese Yes \_\_\_ No \_\_\_ Any Allergies \_\_\_\_\_ Any Condition You Want School Know \_\_\_\_\_  
 Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_  
 Parent's Name \_\_\_\_\_ Home Phone \_\_\_\_\_  
 Parent's Cell Phone \_\_\_\_\_ Parent's Email \_\_\_\_\_  
 Parent's WeChat if any \_\_\_\_\_ Emergency Contact phone \_\_\_\_\_

## Camp Choices

	WEEK	THEME	CHOICE <input checked="" type="checkbox"/>	LEVEL (circle one)
1	Week 1 (June 5-8)	Travel to China		Upper lower
2	Week 2 (June 12-15)	Family, People and Love		Upper lower
3	Week 3 (June 19-22)	Panda Garden (animals)		Upper lower
4	Week 4 (June 26-29)	Enchanted Colors		Upper lower
5	Week 5 (July 10-13)	I am a little chef(food)		Upper lower
6	Week 6 (July 17-20)	Mystery Math (numbers)		Upper lower
7	Week 7 (July 24-27)	Little dress designer		Upper lower
8	Week 8 (July 31-Aug 3)	Chinese Folk Games		Upper lower
9	Week 9 (Aug 7-Aug10)	Wonder World (Mystery Week)		Upper lower

## Time & Fee

June 6th - August 10th (closed week of July 4th) Monday to Thursday: 8:30 am - 12:00 pm 8:30 - 9:30 warm up, preparation 9:00 - 9:50 Chinese language class 10:00 - 10:50 Chinese culture project or activities 11:00 - 11:50 Traditional Chinese sports	Before May 1st: Reg. fee: \$20.00 per student; \$30 per family Camp fee: \$175 per week After May 1st: Add \$30 per week	<b>Payment method:</b> By Zelle to <a href="mailto:Lonestarchinese@gmail.com">Lonestarchinese@gmail.com</a>  By Venmo to Jing-Huang-45 By Check to Lone Star Chinese School Others: ask for
---	---	---

## Parent / Student Signatures

**With my signature as the parent/guardian/student...**

- I hereby give my approval to enroll above student/students to Lone Star Chinese School and participate in all school's activities.
- I hereby give my permission to the school to take photos/videos on above student. The photos/video are released to School use only.
- I understand that payment is based on semester. I am responsible for all payments to school before class starts. No refunds for any students who withdraw the fee for the reason of, but not limited to: missed class. There is \$25.00 NSF fee for returned checks.
- I understand that the tuition, fees, teachers, schedules, and location are subject to change. Please give a 24-hour notice if you wish to cancel or reschedule your class. Otherwise, the amount of a class will be charged.
- I understand that the tuition and fees are not transferable- no transferring to other students/class/semester/session.

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

## Office Use Only

	Payment	Registration	Tuition	Textbook	materials	Discounts	TOTAL PAYMENT
Student 1							
Student 2							

LONE STAR CHINESE SCHOOL  
MEDICAL & COVID LIABILITY WAIVER  
RELEASE OF CLAIMS  
MEDIA RELEASE FORM



I, \_\_\_\_\_ (parent's name), as the parent/guardian of:  
\_\_\_\_\_ and \_\_\_\_\_ (student/students' name)

- I hereby give my approval to enroll above student/students to LONE STAR Chinese School.
- I hereby give my permission to above student/students to participate in all Chinese school activities.
- I hereby release LONE STAR Chinese School, its teachers, volunteers, guests, other parents, and students from liability for any illness, injury, misadventure, harm of any kind suffered because of participation in Chinese school camps, classes, and all activities.
- By signing this form, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that above student/students and I may be exposed to or infected by COVID-19 by attending activities in LONE STAR Chinese school. I further acknowledge that LONE STAR Chinese school will not be liable if above student/students and I are infected by COVID-19.
- I hereby give my permission to LONE STAR Chinese school to act as guardian if I cannot be contacted in the event of an accident or medical emergency involving my child/children. Also, in the event of emergency, the school has my permission to obtain medical treatment for the proper care and well-being of my child/children. All the cost is my responsibility.
- I hereby give my permission to LONE STAR Chinese school to take photos and videos of above student/students. The photos and videos may be released to the school, or other related flyers, websites, newsletters, weekly bulletin board, etc.

---

**Student 1 Name:** \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Allergies: \_\_\_\_\_

Any conditions (not limited to medical) the school needs to be aware of \_\_\_\_\_

**Student 2 Name:** \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Allergies: \_\_\_\_\_

Any conditions (not limited to medical) the school needs to be aware of \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Father Name (printed) \_\_\_\_\_ Phone # \_\_\_\_\_

Mother Name (printed) \_\_\_\_\_ Phone # \_\_\_\_\_

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

Emergency Hospital You Prefer \_\_\_\_\_ Phone# \_\_\_\_\_

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