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**Chinese Christian Church of Greater Washington D.C.
2018 Summer Retreat July 20–22 Registration Form**

Room Assignment:

Name (PRINT)	Sex		Age Group			Arrival				Total Costs*	Accommo- dation		Name(s) of Room mates	Mark ✓ if need ride but not yet arranged		
	LAST, First (English) Name	Chinese	M	F	Child Age/ Grade*	TG/ Adult/ Senior*	Lang* (C/E)	Friday AM	Friday PM		Saturday AM	Saturday PM			Apt.	Dorm
*see note below										Total Cost Paid		\$	Paid by: Cash / Check #			

PLAN	Adult (12 & up)		Children (5-11)
	Financial Aid	Full	Half

Notes*

- ❖ There will be a \$25 fee/charge for each Full Financial Aid given.
- ❖ After **June 17th** a late fee of \$50 per person will be charged for registration.
- ❖ Child Age/Grade: indicates school grade (1st to 6th), age if under 1st grade
- ❖ TG/Adult/Senior: Senior is to indicate if need special accommodation
- ❖ Language (C/E): please indicate the language of attending session (English or Chinese programs)
- ❖ Please make your check payable to **CCCGW** and return this form with check or cash to the Registration team

Costs: This PLAN includes cost of meals and lodging only. PLAN includes Friday (Lunch, Dinner, and Lodging), Saturday (Breakfast, Lunch, Dinner, and Lodging), Sunday Breakfast and Lunch. Rooms are double occupancy.

Parents must provide below contact information if kids are in elementary school age or under.

**** Parents' cell phone # (Dad) _____, (Mom) _____ & email addresses : (Dad) _____, (Mom) _____ ****

Arrival Time on Friday: Participants are requested to arrive between 9:00 am to 11:30 am on Friday, July 20st, 2018.

Liability Waiver:

I certify that my (and/or my family's) participation in this Summer Retreat will be voluntary. I understand that participation carries the risks inherent both to such activities and to the location of the retreat for self and any who would claim under me. I release Chinese Christian Church of Greater Washington DC, its trustees, employees from any liability and loss, injury or damage to my person (or any member of my family) or property which may result from my/our participation.

Signature _____ Date _____ Emergency Telephone number: _____

Signature of Parent/Guardian: _____ Date _____ **(Please also submit Summer Retreat Teens Parental Consent Form)**