

Golden Crane Senior Center 康鶴耆英中心

Participant's Contact Information

Name (姓名) _____ Chinese Name (中文) _____

Birth Date (生日) _____ Gender (性別) __M __F

Address (地址) _____

City (市) _____ State (州) _____ Zip Code _____

Phone Number (電話) _____ Cell. Number (手機) _____

E-mail address (電子信函) _____

Emergency Information (緊急意外聯絡資料)

Contact (聯絡) _____

Relationship (關係) _____ Phone Number (電話) _____

Doctor (醫生) _____ Hospital (醫院) _____

Disclaimer of Liability 無責任承擔申明

Physical Activities such as Tai-Chi, Yuan-Ji dance, Yoga, Stretch etc. involve some risk of physical injuries. Please consult your personal physician if you have any medical conditions before attending any of these classes.

太極，元極舞，瑜珈等活動對體力有一定的要求。視乎各人的健康情況，有引至受傷的可能。參加之前，務請與貴家庭醫生商討。

Your participation is purely voluntary and the Golden Crane Senior Center shall not be held responsible for any injuries you may sustain in participating in any activities and classes.

您參加以上各項的活動是自願性，如有受傷，康鶴耆英中心不承擔任何的責任。

_____ Date (日期) _____

Signature (簽名)

_____ Print Name (姓名)

Annual Registration Fee (註冊費/年): \$ 20.00 (non-refundable and non-prorated)

Payment Method:

___ Cash ___ Check Receipt # _____ Received By _____