

2010 中国西安华德福夏令营申请表			
Application Waldorfcamp 2010 Xi'An, China			
申请参与时间（可多选） Date (multiple choice possible):		请在选项前方框中打勾选择 Please check the appropriate <input checked="" type="checkbox"/>	
第一周：主题—艺术与手工艺，7月12~18日 Week 1: Theme Arts & Craft Start date: July 12th until July 18th		如果您申请两周以上的活动，第二个活动周起每周费用可得到20%的优惠（比如：报名一周费用为2000RMB，两周同报只需3600RMB，三周5200RMB，四周6800RMB，五周特别优惠至8000RMB）。每周主题是指：每周固定一日为主题日，学生们将围绕该主题进行专项学习、活动。 If you book more than one week you will receive 20% Discount on the 2nd Week and 20% Discount (e.g. 2000RMB/1 Week, 3600RMB/2 Weeks, 5200RMB/3 Weeks, 6800RMB/4 weeks, specially 8000RMB/5 weeks). The weekly theme means, that students will have one day of the week, focusing on the theme of the week.	
第二周：主题—时装时尚，7月19~25日 Week 2: Theme: Fashion Start date: July 19th until July 25th			
第三周：主题—电影艺术，7月26~8月1日 Week 3: Theme: Film/Movie Start date: July 26th until August 1st			
第四周：主题—绘画艺术，8月2~8日 Week 4: Theme: Painting Start date: August 2nd until August 8th			
第五周：主题—戏剧表演，8月9~15日 Week 5: Theme: Theater Start date: August 9th until August 15th			
城市 City		请选择您要参加的城市 <input checked="" type="checkbox"/> 西安 Xi'An / <input type="checkbox"/> 杭州 Hangzhou / <input type="checkbox"/> 邢台 Xingtai Please choose the city you want to join (目前只开办西安夏令营 currently only Xi'an available)	
学生个人信息 Student Personal Information			
姓 Family Name		英文名（可选） English Name (optional)	
名 First Name		身份证号 / ID Card No.	
性别 Sex		学校和专业 / School and Major	
男 / 女		T恤尺码 T-Shirt Size	
出生日期 DOB		S / M / L / XL	
YY MM DD			
喜欢的活动 Preferred Activity		我们将根据您的兴趣爱好制定特别的活动（除了我们已经有的主题日） The student can choose one focus activity that will be dealt with all week, except on the one day that will be reserved for the weekly theme.	
艺术与手工艺 / 时装时尚 / 电影艺术 / 绘画艺术 / 戏剧表演 Arts & Craft Fashion Film-Movie Painting Theater			
家长联络信息 Parental Contact Information			
家庭电话 Telephone (home)		移动电话 Cellphone	
工作电话 Telephone (work)			
家庭住址 Home Address			
电子邮箱 E-mai Address		第二电子邮箱 2nd E-mail Address	
其他紧急联络人（姓名） Contact Person for Emergency		移动电话 Cellphone	
与学生关系说明 Relationship to Student		母亲 Mother / 父亲 Father / 其他监护人 Other Guardian（请说明 Please Specify）_____	
缴费选项 Payment Option			
网上银行支付 online payment			
银行账户汇款 Remit to our bank account directly		请提供银行汇款单据号码 Remittance information	
合作学校财务处付费 Payment at finance office of the partner school		付款地址 Payment Address	
		陕西省西安市丰登南路19号（邮/zip: 710077） No.19 South Fengdeng Rd, Xi'An City,	
健康情况说明 Medical Information		您是通过何种途径了解西安华德福国际夏令营的？ How did you know WaldorfCamp in Xi'An?	
		媒体广告（电视、报纸、广播、网络） Media Advertisement	
		校园宣传 Campus Propaganda	
		朋友介绍 Recommendation from Friends	
		其他/others: _____	
如您有以下身体疾病需要特别护理，请在此说明： Do you have any of the following medical conditions which may require special care?			
严重哮喘症 / 强烈过敏症 / 癫痫症 / 糖尿病 Severe Asthma / Life-threatening allergy / Seizure disorder or Epilepsy / Diabetes			
您现在正在用药吗？如有，请说明： Are you on any medication? If yes, please specify:			
您有过敏史过敏症状吗？如有，请说明： Do you have any allergies? If yes, please specify:			
如您对食物有何特别要求请说明： Please indicate any special food requirements:			
权责声明 Authorization			
我已清晰理解并同意上述所有信息。基于此理解，我同意我的孩子参加此次华德福营地活动，并且同意其参与营地的各项活动，并授予该活动组织者及其任命者在上述申请学生发声紧急事故或者生病情况下实施必需的紧急救护或者送医的权利。我已知晓我的孩子需要遵守华德福活动中的规定，如有违规，我将承担相应退学责任，校方不需退还任何费用。 I acknowledge all information given above are accurate to the best of my knowledge. In permitting my child to attend the Waldorfcamp Program, I, the undersigned, permit my child to participate in the full range of activities and authorize the Program Coordinator or his/her appointee, in the event of accident or illness affecting this above named student, to authorize on my behalf all procedures, including admission to hospital and necessary treatment therein, as he or she may deem necessary for the care and well-being of the student. I understand that my child is obliged to abide by the Rules and Regulation of Waldorfcamp.org and Failure to do so, my result in suspension from the program without any refund.			
如您有不理解的问题或建议（参考“常见问题“页）： Your message/Question to us (also see faqs for more Information):			
家长 / 监护人姓名： Parent's / Guardian's Name:		家长 / 监护人身份证号码： Parent's / Guardian's ID Card No.:	
I have acknowledged all of the conditions in written, therefore, I give my Signature: 我已知晓并同意申请表中列明之所有信息，所以，这里我签字确认此次申请：			