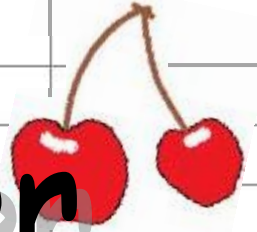


Project #1

Go! Girl Power



☺ 有計畫的夏天不會變調。

A planned summer will not go bad.

少女領袖訓練營 7/14 (Tue) - 7/16 (Thr)

Leadership workshop for teengirls.

Activities include workshops on healthy relationships, self-esteem, safety/purity issues and peer mediation on making right decisions, plus lots and lots of fun summer games and DIY sessions!

對象: Teengirl 12 yrs & up

*Contact Garden of Hope 紐約勵馨 @ 718-321-8862 for registration.





紐約勵馨婦幼關懷中心

2009 Girl's Leadership Workshop 勵馨少女領袖訓練營

Registration Form 報名表

(7/14-7/16, 9AM-5PM)

Participant 參加人:

English Name 英文姓名: _____

Chinese Name 中文姓名: _____

Parent/Guardian 家長/ 監護人資料

Name 姓名: _____

Home Phone: _____

Mobile Phone: _____

Birth Date 生日: ____ / ____ / ____ Age 年齡: ____

School 學校: _____ Grade in Fall 新學期年級: _____

Address 地址: _____

E-mail 電郵: _____

Emergency Contact 緊急聯絡人資料

Name 姓名: _____ Relationship 關係: _____ Number 電話: _____

Name 姓名: _____ Relationship 關係: _____ Number 電話: _____

Parent/Guardian Permission 家長/監護人同意書:

As a legal guardian I give permission for the registrant to participate in all phases of workshop activities and off-site trips. I understand and agree to cooperate with all regulations. I will not allow registrant to attend if not in good physical condition. In an emergency, when the undersigned or other person named cannot be reached, I give permission for the event authorities to take any emergency measures deemed appropriate. It is understood that all reasonable efforts will be made to contact the parent/guardian. By giving my signature below, I also declare understanding to the rule that the registrant will not be allowed to leave workshop location without permission from event authorities. Damages occur outside of the workshop shall be under parent/ guardian's responsibility.

I understand that when participating in Leadership Workshop activities the registrant may be photographed for print, video or electronic imaging. I understand that the images may be used in promotional and fundraising materials, news releases and other published formats, and will be the sole property of Garden Of Hope New York, USA.

我同意我的孩子參加勵馨少女領袖訓練營所安排的室內及室外活動。我們會遵守營會所有規定。如果我的孩子身體有任何不適，我會帶他回家。如果有任何緊急事故發生，勵馨會聯絡我及上列的緊急聯絡人，如果聯絡不上，我授權營會做必要的緊急處理。營會不許可參加學員未經通過擅自離開，如果發生，學員離營之後所有事情，由家長自行負責。我瞭解營會當中會拍照、攝影，供紐約勵馨存檔及文宣使用。

Check if registrant May not: Be photographed for Garden of Hope publicity purposes 不願意接受照相/錄像
如有右列情形請打勾 May not: Participate in _____ e.g., active sports...etc 不能參加某些特殊活動

Signature of Parent/Guardian 家長/ 監護人簽名 _____ Date 日期 _____

T-Shirt Order: (Fee is included) T恤尺寸: YOUTH: S ____ M ____ LADIES: S ____ M ____ L ____

Please attach 2009 Health Examination. 請附上09年健康檢查報告

Space is limited, Registration Deadline: Friday, July 3, 2009

Please mail this form with \$30.00 to P.O. Box 520048, Flushing, NY 11352.

Check shall be made payable to: Garden of Hope. Questions please contact 718-321-8862

名額有限，七月三日截止報名。三十元費用請聯用報名表寄到P.O.Box 520048, Flushing, NY 11352

支票抬頭請寫 Garden Of Hope

諮詢請洽紐約勵馨(718) 321-8862