



卡加利華僑中文學校

Calgary Chinese Public School Society

Operated by The Calgary Chinese Public School Society

Email address: ccps@ccpschool.ca web address: ccpschool.ca

Facebook website: www.facebook.com/calgarychineseprivateschool

126 - 2nd Avenue, SW
Calgary, Alberta T2P 0B9
Tel: 403-264-2233
Fax: 403-282-9854

2026年7月份暑期班學生註冊章程及表格

一、暑期班學生註冊訂於2026年3月7日開始，截止日期為2026年4月30日。

組別：幼稚園至小學三年級 / 小學四至六年級

上課日期及時間：2026年7月6日至7月10日(第一期)、7月13日至7月17日(第二期) 星期一至五 上午9時至下午3時

學費：每期\$250(一併報讀兩期，學費為\$480) 若留校至五時，每期加收\$50。

課程內容：(註：主題式中文及下午活動待定)

	星期一	星期二	星期三	星期四	星期五
9:00 am- 12:00 主題式中文	中文	中文	中文	中文	中文
12:00-1:00 pm	午膳(自備)				
1:00 pm- 2:00 pm	活動	活動	活動	活動	活動
2:00 pm-3:00 pm					

二、學費繳交辦法：請填妥學生註冊表，並與現金或支票一併繳交。支票抬頭：Calgary Chinese Public School Society
e-transfer payment：The Calgary Chinese Public School Society Email：tuition@ccpschool.ca
(請在訊息欄填上學生姓名及「summer class」)

三、退學申請：辦理退學須於6月30日或之前申請，本校將扣除手續費\$60，餘款退還申請人，若在6月30日後申請退學，學費一概不予退還或轉讓。

中文姓名 _____ 英文姓名 _____
Chinese Name： _____ English Name： _____
(Family Name) (First Name / Other Name)

中文學校現讀班級 _____ 英文學校現讀班級 _____
Grade at Chinese School: _____ Grade at English School: _____

報讀暑期班組別：七月份第一期 七月份第二期 七月份第一、二期
幼稚園至三年級 小學四至六年級

出生日期Date of Birth: _____ 性別Gender: _____ 年齡Age: _____

亞省醫療號碼 _____ 電子郵件 _____
Alberta Health Care Number: _____ Email Address: _____

地址 _____ 郵遞區號 _____
Address: _____ Postal Code: _____

電話 _____ 緊急聯絡電話 _____
Phone No.: _____ Emergency Phone No.: _____

家長或監護人姓名 _____ 關係 _____
Name of Parent / Guardian: _____ Relationship: _____

地址 _____ 電話 _____
Address: _____ Phone No.: _____

Waiver Release (豁免聲明)

I understand that my child is involved in and participates in the learning programs and activities of the Calgary Chinese Private School (the "School") operated by the Calgary Chinese Public School Society (the "Society"). While every care is given to ensure a safe environment, I do not hold the School and the Society, any of its staff and volunteers, liable in case of injury or harm, however arising, sustained by my child. 本人明白我的孩子在卡加利華僑中文學校學習期間，每方都會竭盡全力，提供一個安全的學習環境。在這個前提下，如果我的孩子在學習期間受到傷害，我同意不會要求學校及其校董會，包括其校董會成員，員工和義工負任何責任和提出賠償。

Parent/Guardian Signature 家長/監護人簽署： _____ Date 日期： _____

校方專用 For Office Use Only

Summer School Fee \$250 / \$300	Biweekly \$480 / \$580	Remarks
Cheque / Cash		Receipt No.:



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Acknowledgement of Risk, Consent of Parent or Guardian, Release of Liability/Responsibility

STUDENT LEGAL NAME _____

Summer Class: _____

The School will make every reasonable effort to ascertain that:

- The supervisors and staff of the Service Provider are experienced and qualified.
- The students who undertake the program or activities will be adequately supervised.
- The classrooms and/or facilities where the activity will take place are appropriate and safe.
- Any equipment made available by the Service provider or used in the activity is deemed to be appropriate, safe and well maintained.

Consent and Acknowledgement of Risk

1. I am satisfied that I have been informed of my right to obtain as much information about this program, or activity as I feel necessary, including information beyond that information provided to me by the school or Board to the extent that I require and am not, in any way, relying solely upon information provided by the school respecting the nature and extent of the risks and hazards associated with the program or activity.
2. I freely and voluntarily assume the risks and hazards inherent in the nature of the program or activity and understand and acknowledge that my child, as a participant, may suffer personal and potentially serious injury due to an unforeseeable or fortuitous event.
3. My child has been informed that he/she is to abide by the rules and regulations including directions and instructions from the school's administrators, instructors, and supervisors as imposed on students while participating in the program or activities. This shall include his/her participation in all of the introductory sessions and meet all prerequisites prior to his/her participation in the activity or program.
4. In the event that my child fails to abide by the rules and regulations imposed on the student while participating in the program or activities, disciplinary action may either require that he/she not participate in the program or activity, or that I will be contacted to have him/her picked up.
5. I acknowledge that it is my responsibility to advise the school of any medical or health concerns of my child which may affect his/her participation in the stated program or activity.
6. Based on my understanding, acknowledgement, and consents as described herein, I agree that _____ has my permission to participate in this program or activity.
(Legal name of Student)

Release of Liability, Waiver of Claims and Indemnity Agreement

In consideration of the acceptance of the registration of my child to participate in the school, I agree to indemnify and hold harmless Calgary Chinese Private School, its teachers, staff and employees (the "School") from all claims for injuries, damages, losses, death, costs and expenses of all kinds, including legal fees, in any way arising from or related to school activities both on and off school site.

I acknowledge that School does not warrant any personal equipment/property or the negligent use of any personal equipment/property.

Release of Responsibility

To protect student's safety, the School does not permit any student to leave the building during the school hours. In the event that any student leaves the building without school's permission, the School holds no responsibilities for any activities, incidents, and accidents that may occur off-site.

Photograph Release

I am aware that for the purposes of communications between parents and the school and promotion of the school that the likeness of my child may be used in form of photographs, videotape or audio recordings. I hereby grant permission to use any such photos, videotape or audio recordings without further approval from myself, my heirs, executors or administrators.

Date: _____ Name: _____ Signature: _____
Parent/Guardian (Please Print) Parent/Guardian