**Rocky Railway VBS 2020 Registration**

**Orange County Community Christian Church**

**4421 Cerritos Ave., Cypress, CA 90630, 714- 826-5667**

**Sr. Pastor Dr. Carl Che** [**www.occcc.org**](http://www.occcc.org)

**Minister Yeh, 714-553-9602**

**Date**日期**：Saturday, June 27th  and Sunday, June 28th 11 AM – Noon** (6/27,28周六,日11点至中午)

**Name**姓名 **(English**英文**) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Chinese**中文**) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Current Grade**完成年级 **\_\_\_\_\_\_\_\_\_\_\_\_\_Mandarin Speaking**讲中文 **YES**是**\_\_\_\_ NO**否**\_\_\_\_**

**Age** 年龄 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth** 生日\_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Street Address** 地址**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Cit y**城市**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip**邮编 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent name(s)** 父母英文名字 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Chinese**中文**) \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**E-mail address to sign into WebEx** 使用WebEx的电邮地址**:** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**WebEx username**使用WebEx的姓名**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent phone number during VBS** 在VBS时父母联络电话 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Home Church**所属教会 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Not Available**暂时沒有  **\_\_\_\_\_\_\_\_\_\_\_\_**

**E-mail form to** **oc4vbs@gmail.com** **to register. Once we received your completed registration, Rocky Railway VBS WebEx Session Number will be e-mailed to you as an invitation. Please download Cisco WebEx on your computer, iPad, or smartphone ahead of time.**

**请将报名表电邮至：****oc4vbs@gmail.com** **一旦你注册完毕，如同邀请卡的本次VBS WebEx会议号码，就会电邮给你。请事先下载Cisco WebEx在你的电脑，IPad，或手机中。**

**Items Needed**需用物品**: Bible, drawing paper, crayons, markers or paint, uninterrupted internet connection圣经,**画图纸,画图笔,马克笔,网络连线系统

**How do you know us** ? 如何知道有這活動? □Friend 朋友介绍 □Flyer传单 □Banner sign 本教会看板

□Other (please specify请说明) **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\*\*\*\*\*\*\*PLEASE SIGN RELEASE FORM ON BACK请填写背面\*\*\*\*\*\*\***

ORANGE COUNTY COMMUNITY CHRISTIAN CHURCH PERMISSION AND RELEASE FORM

致橙縣基督教會允准及授權狀

For the period of January 1(時間:1月1日), 20\_\_\_through December 31(至12月31日), 20\_\_\_

I我, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby grant permission for the following特允准:

 Name (first, middle initial, last)姓名（請寫中文）

Circle請圈選: Self本人：

Minor(s), named 未成年人姓名: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

 Name (first, middle initial, last) 姓名(請寫英文) Name (first, middle initial, last) 姓名(請寫中文)

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

 Name (first, middle initial, last) 姓名(請寫英文) Name (first, middle initial, last) 姓名(請寫中文)

to participate in activities with Orange County Community Christian Church (OC4) and hereby release OC4, its staff, employees, and helpers from any and all liabilities connected with said activities, including his/her/their transportation during participation in activities with OC4.

參加橙縣基督教會的各種活動，並謹此豁免橙縣基督教會的職員，服務人員承擔上述人員在參加教會活動中，包括交通中所產生 的所有的相關索賠及責任。

In the event of an emergency, due to an illness or accident, I hereby give permission to church to take or call ambulance to bring the person to the hospital for treatment.

在發生疾病或交通事故的緊急情況下，我特此授權教會董事會或被指派服務人員护送病人或叫救护车就医。

Allergies/Medical conditions & 個人過敏/病情及用藥名稱

Name(s) 藥名:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Insurance Co保險公司名稱:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Policy保單號碼#:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Emergency phone緊急情況聯繫人電話號碼#:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Power of Attorney我是監護人: Yes是\_\_\_ No否\_\_\_\_\_

（Please attach a copy if has Power of Attorney監護人请附授权书影印本)

Signature of (circle) 授權人簽名(請圈選)

Self/Parent/Guardian本人/父母/監護人:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date日期:\_\_\_\_\_\_\_\_\_\_\_\_\_\_