

Asian-American Coalition for Education 亞洲育才協會

211-17 46 Rd, Bayside, NY 11361 * Tel: 718-229-4518, 718-229-1368, 718-570-2202

AACE Summer Camp 夏令營

Recreational Activities and Field Trip Itinerary Consent Form

Recreational Activities and Out-of-Camp Trips Itinerary and Consent Form					
Trip Date	Trip Destination	Telephone #	Trip Address	Mode of Transportation	Parental Consent
7/15/2020				School Bus	Yes ___ No ___
7/22/2020				School Bus	Yes ___ No ___
7/29/2020				School Bus	Yes ___ No ___
8/5/2020				School Bus	Yes ___ No ___
8/12/2020				School Bus	Yes ___ No ___

Parental Consent

I agree to allow my child _____ (name) of class ____ to participate in all scheduled indoor and outdoor activities of AACE during his or her participation in the AACE program this summer.

I understand the foregoing and expressly assume all liabilities in connection with transportation. I hereby agree to waive and hold harmless AACE and its staff and employees from and against any and all claims arising out of such transportation. I also hereby agree to taking video and pictures of children by school officials and free to use without permission.

Signature of Parent/Guardian: _____ Date: _____

戶外活動委託書

我同意我的孩子 _____ (姓名) _____ (班級)

參加亞洲育才協會夏令營舉辦的所有戶內及戶外活動。

我明白上述委託的含義並且假設了這種活動的全部可能性。我在此同意放棄并反對對亞洲育才協會和他們的老師，工作人員在這些活動中可能提起的全部訴訟。我也同意學校替孩子录像和照相并且使用这些资料。

家長/監護人簽名: _____ 日期: _____

Trip schedule and destinations may change due to unforeseen circumstances

旅行计划可能依实际情况而改变

