

Herald Gospel Camp Registration Form 2026

營友相片
Camper's
Photo

營友姓名 (英) _____ 出生日期 _____ 年齡 _____ 性別 ☐ 男/M ☐ 女/F
Camper's English Name _____ Birthday _____ Age _____ Gender _____

完整地址 _____
Complete Address (Street, City, State, and Zip Code) _____

電話 (家) _____ 語言: ☐ 英語(E) ☐ 國語(M) ☐ 粵語(C) ☐ 其他(Other): _____
Home Phone _____ Language _____

父親姓名 (中/英) _____ 工作電話 _____ 手提電話 _____
Father's Name (Chinese/English) _____ Work Phone _____ Cell number _____

母親姓名 (中/英) _____ 工作電話 _____ 手提電話 _____
Mother's Name (Chinese/English) _____ Work Phone _____ Cell number _____

學校 _____ 學區 _____ 年級 (2026 年秋季) _____
School _____ Borough _____ Grade (In September 2026) _____

營友電郵 _____ 父母電郵 _____
Camper's Email _____ Primary Parent's or Guardian's Email _____

你曾否參加過角聲福音夏令營? ☐ No 從未參加 ☐ Yes 曾經參加 -- 哪一年? _____
Has your child participated in Herald Gospel Camp previously? Which year(s)? _____

營友是基督徒嗎? Is the camper a Christian? ☐ 是 Yes ☐ 不是 No 如果是, 是哪個教會? If yes, which church? _____

襯衫尺寸 Camper T-shirt Size (Adult Sizes): ☐ Small ☐ Medium ☐ Large ☐ X-Large

LIABILITY WAIVER

I, (Parent's Name) _____, allow my child (Camper's Name) _____ to attend the Herald Gospel Camp program. I understand that all campers must be covered with their own accidental/medical insurance. I give permission to Chinese Christian Herald Crusades to arrange necessary related transportation for my child. I hereby expressly agree that I will waive my legal rights against Chinese Christian Herald Crusades, Inc. in case of any accident and be responsible for all the cost.

I give permission on behalf of my child to use any photo of their image for purposes of CCHC and the Youth Dept. programming promotion, fundraising opportunities and public relations.

放棄法律權益同意書

我 (家長英文姓名) _____, 准許我的孩子 (營友姓名) _____ 參加角聲「福音夏令營」。我知道, 所有營友都已經具備意外/醫療保險。我讓基督教角聲佈道團為我的子女安排交通, 如有任何意外, 我同意自己承擔費用, 將不在法律上追究基督教角聲佈道團的責任。

我准許基督教角聲佈道團和其青少年中心, 使用我孩子參加活動時的照片, 作為推廣、籌款和公共關係等之用。

家長簽名 Parent's Signature _____ 日期 Date _____



Tel. 718-938-5328, E-mail: campherald@cchc.org

Herald Gospel Camp 角聲福音夏令營

☐ \$650 Session 1: 6/28/26 – 7/3/26

☐ \$720 Session 2: 7/12/26 - 7/19/26

☐ \$720 Session 3: 7/26/26 - 8/2/26

Important Notes 重要事項

*註冊費 (恕不退回) / Registration Fee (Non-refundable) :

\$30 個人/camper \$50 家庭/Sibling

*Multiple Session: 5% off camp fee

----- 請把所有表格及支票 (支票抬頭請寫 **CCHC**) 寄至 156-03 Horace Harding Expressway Flushing, NY 11367 -----

Please make checks payable to **CCHC** and write down the **camper's name & session on the memo section.**

Send completed forms (including Registration form, Health form, and copy of insurance card) with payment to:

CCHC-Camp Herald, 156-03 Horace Harding Expressway Flushing, NY 11367

角聲員工填寫 Office Use Only

Health form: ☐ Insurance Card: ☐

Registration Fee \$ _____ ☐ Cash ☐ Check # _____ Receipt # _____ Date: ____/____/____

Camp Fee \$ _____ ☐ Cash ☐ Check # _____ Receipt # _____ Date: ____/____/____

Additional Comments: _____

*Camp Herald Programs are held in a NYS Dept of Health Inspected Facility