



## 2022 LACS Chinese Immersion Summer Camp Application Form

### PART 1: BASIC STUDENT INFORMATION

Student's Name						
First Name	Last Name	Chinese Name (if applicable)	Gender:	Date of Birth (mm/dd/yyyy)	Grade in 2022-23	Chinese grade level (For Office use)
			<input type="checkbox"/> Male <input type="checkbox"/> Female			
			<input type="checkbox"/> Male <input type="checkbox"/> Female			
			<input type="checkbox"/> Male <input type="checkbox"/> Female			

Name of School in Attendance: \_\_\_\_\_

Home Address: \_\_\_\_\_

Medical Concerns (in any, such as allergy, epilepsy, etc.):  
\_\_\_\_\_

### PART 2: EMERGENCY CONTACT INFORMATION

Name of Parent/Guardian #1:	Relationship to Student:
Cell Phone Number:	Home Phone Number:
Email Address:	
Name of Parent/Guardian #2:	Relationship to Student:
Cell Phone Number:	Home Phone Number (if different):
Email Address:	
Physician's Name:	Office Phone Number:



**PART 3: PLEASE CHECK THE WEEKS YOUR CHILD WILL ATTEND SUMMER CAMP**

**Elective class: 1. Art of Cartooning. 2. Basketball. 3. Clay Sculpture. 4. Chess.**

<b>Time Date</b>	<b>Full Day 8:30am 3:30pm</b>	<b>Full Day with extended care 8:30am 6:00 pm</b>	<b>Full Day with elective classes 8:30am-6:00pm</b>
6/13-6/17			
6/20-6/24			
6/27-7/1			
*7/5-7/8			
7/11-7/15			
7/18-7/22			
7/25-7/29			
8/1-8/5			

	<b>Fee</b>	<b># of weeks</b>	<b>Total</b>
<b>Full day (8:30am-3:30pm)</b>	<b>\$450/week</b>		
<b>Full Day with extended care (8:30am-6:00pm)</b>	<b>\$550/week</b>		
<b>Full Day with elective classes (8:30am-6:00pm)</b>	<b>\$650/week</b>		
<b>Application Fee<sup>1</sup></b>	<b>\$50/student</b>		
<b>Material Fee</b>	<b>\$150/week</b>		
		<b>Total =</b>	<b>\$</b>

*The \$50 application fee is waived for current LACS students.*

*\*There is no class on 7/4. The tuition for 7/4 will be deduct from the total price.*

*5% discount on tuition for siblings.*

*5% discount for registering at least 4 weeks by 4/15/2022.*

**Camp Location: 1425 Springer Road, Mountain View 94040**

**Completed registration forms and full tuition payments must be submitted no later than May 20th, 2022 to secure a spot.**



- **First-come, first-served:** Space is limited, and campers will be accepted on a first-come, first-served basis. However, current students have priority enrollment. Late enrollment can't be guaranteed and will be accepted subject to availability.
- **Refunds, Withdrawals and Cancellations:**  
Email ([summer@losaltoschinese.school](mailto:summer@losaltoschinese.school)) notification is required for all withdraws. For withdrawals on or before 5/20/2022, tuition will be refunded at 100%; for withdrawals on or before 6/10/2022, tuition will be refunded at 80%. After 6/13/2022, no refund will be given. Application fee is not refundable. LACS offer no refund, credit nor make-ups for missed classes, unless the camp is cancelled by LACS.
- LACS will enforce a \$50 fee for changing sessions once camp started. \$50 will be charged for all returned check.
- **To Apply:** Please submit Application packet with tuition and application fees to complete the enrollment. **Please make check payable to “Los Altos Chinese School”.**  
Applications with payment can be submitted the following ways:
  1. Mail to P.O Box 582, Los Altos, CA 94023 or
  2. Drop off at the LACS office: 1425 Springer Road, Mountain View, 94040.  
Office hours: Monday to Friday, 9:30am-6:00pm. Contact phone#: 650-391-5252

**PHOTO RELEASE FORM FOR MINORS (IF UNDER 18)**

Please check one of the options below, sign and return the form to Los Altos Chinese School:

I give Los Altos Chinese School (LACS) has my permission to use my or my child's image and voice in photograph, video, and audio recording to promote the school and all its programs and services. I understand that my and my child's image and voice may be used in print publications, online publications, presentations, websites, social media, and other forms as deemed appropriate by LACS. I also understand that no royalty, fee or other compensation shall become payable to me by reason of such use.

I do not give Los Altos Chinese School my permission to use my or my child's image and voice for any reason.

Child's name: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_



**AGREEMENT TO ACCEPT FINANCIAL RESPONSIBILITY FOR PAYMENT AND TO ABIDE BY LOS ALTOS CHINESE SCHOOL POLICIES:**

I understand and agree that it is my responsibility to read and comply with the Los Altos Chinese School Rules and Regulations included in this registration packet. I understand and agree to accept financial responsibility for the payment of the invoice submitted by Los Altos Chinese School. I understand and agree it is my responsibility to keep my account paid up to date and that failure to keep my account current may result in my child(ren) being denied access to the Los Altos Chinese School Program and my account being sent to collection. In addition, I have read the Los Altos Chinese Center Billing Policy included in this registration packet and agree to accept all terms and conditions as outlined in these items. I understand the Los Altos Chinese School Registration Form and Emergency Card(s) must be on file with Los Altos Chinese School prior to my child(ren) attending Los Altos Chinese School. I further understand and agree that my failure to comply with the policies and procedures will result in either denial of this application or loss of privileges for my child(ren) to attend Los Altos Chinese School.

Parent/Guardian Name: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

**LIABILITY RELEASE:**

The undersigned, in consideration of participation in the classes, activities and pick-up services, agrees to indemnify and hold Los Altos Chinese School, its contractors, employees and volunteers, Park harmless and release Los Altos Chinese School, its contractors, employees and volunteers, and Parks from any and all liability for any injury which may be suffered by the individual(s) registered at Los Altos Chinese School, arising out of, or in any way connected with participation in the classes, activities and pick-up services. I give my consent for emergency medical or dental treatment, including transportation to the nearest emergency aid facility, if my child(ren) is injured.

**I have read the above agreement, and fully understand that I assume all risks for any injury received. I give permission to Los Altos Chinese School for any necessary medical care to be given to my child(ren) in case of an emergency/accident. I agree to assume full responsibility for the costs of any treatment provided and abide by Los Altos Chinese School rules/policies.**

Parent/Guardian Name: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_