

# MBC Chinese School Summer Camp

## MEDICAL INFORMATION/醫療資訊表

Valid: June 06, 2022 to August 05, 2022

Name of Participant 參加者: \_\_\_\_\_

Please check all items that apply to you and give a detailed explanation below.

- |   |           |   |         |
|---|-----------|---|---------|
| <input type="checkbox"/> Physical Disability        | 身體上的殘障    | <input type="checkbox"/> Asthma               | 哮喘      |
| <input type="checkbox"/> Allergies                  | 過敏        | <input type="checkbox"/> Hay fever            | 花粉熱     |
| <input type="checkbox"/> Diabetes                   | 糖尿病       | <input type="checkbox"/> Anemia               | 貧血      |
| <input type="checkbox"/> High blood pressure        | 高血壓       | <input type="checkbox"/> Measles              | 麻疹      |
| <input type="checkbox"/> Seizures                   | 癲癇        | <input type="checkbox"/> Pregnant             | 懷孕      |
| <input type="checkbox"/> Lung problem               | 肺部問題      | <input type="checkbox"/> Back trouble         | 背部問題    |
| <input type="checkbox"/> Fractured bones            | 骨折        | <input type="checkbox"/> Heart defect/disease | 心臟瑕疵/疾病 |
| <input type="checkbox"/> Bleeding/clotting disorder | 流血不止、血栓疾病 |   |         |
| <input type="checkbox"/> Coordination problems      | 身體協調問題    |   |         |
| <input type="checkbox"/> Others (please describe):  | 其他 (請填寫)  |   |         |

Please list any medications currently taking/請列出正在服用的藥物

If you need to take it at school, please attach the pharmacy label or detailed instructions 如需在校服用請附帶藥房標籤或詳細指引

**All special diets and medications are the participant's own responsibility.**

**飲食有特殊需求或有需要服用的藥物，都由參加者自己負責。**

Activity restrictions/限制參加的活動:

**IMPORTANT:** Please inform the education center personnel as soon as possible if any of your child's health condition or insurance information has changed at any time during the said period above.

注意：一旦您孩子的健康情況或保險資料有任何改變，請盡速通知學校負責人。

Insurance Carrier 投保人 \_\_\_\_\_ Policy No. \_\_\_\_\_

In case of emergency, please contact 遇緊急事件，聯絡人:

Name: 姓名 \_\_\_\_\_ Phone: 電話 \_\_\_\_\_

Relationship: 與學生關係 \_\_\_\_\_

# MBC Chinese School Summer Camp

PARENT/GUARDIAN 家長/法定監護人

## MEDICAL TREATMENT AUTHORIZATION & LIABILITY RELEASE FORM

醫療授權及責任免除書

I, \_\_\_\_\_, being the parent(s)/legal guardian(s) of \_\_\_\_\_ (name of Minor) hereby give our permission for the said minor to engage in all activities of the MBC Chinese School Summer Camp from June 06, 2022 to August 05, 2022, except as noted.

The health information of the said minor given in the Medical Information form is correct, so far as I/we know. During the dates noted on this form, in the event of a medical emergency that I (we) cannot be reached, I (we) hereby give permission to the MBC Education Center and the physicians selected by the MBC Education Center to hospitalize, to secure proper treatment, and to order injections, anesthesia, and/or surgery for our child, the said minor.

我, \_\_\_\_\_ 是學生 \_\_\_\_\_ 的家長/法定監護人, 除非另有指示, 否則我同意此學生於六月六日至八月五日期間, 參加國浸中文學校夏令營的所有活動, 包括在學校範圍之外所有的活動。

I (We) also give permission for the said education center to provide for my child First Aid and over the counter medication as needed for illness or injury as well as the medication noted above.

我同意, 在醫療資訊表上, 所有關於此一學生的醫療資料, 都是真實無誤的。在此一活動期間, 有任何緊急醫療事件發生, 若是無法聯絡到我時, 我在此授權國浸中文學校將此學生送醫。若有必要, 國浸中文學校選擇的醫生, 可以決定注射藥物、施行麻醉或動手術等必要措施。

These authorizations shall remain effective until August 05, 2022, unless sooner revoked in writing delivered to the said MBCEC.

我亦同意, 若此學生受傷時, 國浸中文學校可以提供急救、給予成藥和醫療資訊表上所列的藥物。

I (We) assume all risks and hazards incidental to the conduct of the activities and transportation to and from all activities.

我瞭解, 參加活動以及往返的過程中, 有發生意外傷害的可能性。

I (We) do hereby release, absolve, indemnify and hold harmless the said MBCEC, its staff, its volunteers, the organizers, sponsors, and supervisors from any and all loss, injury, or other damage to us or the above-named minor arising out of any activities and trips endorsed by MBC Chinese School. In case of injury or death to my (our) child, we hereby waive all claims against the organizers, the sponsors, or any of the supervisors appointed by them. We likewise release from responsibility any persons transporting our child to and from the activities.

我在此免除國浸中文學校工作人員、義工和其他活動主辦者、協辦者和負責人, 在夏令營活動期間 (包括旅遊活動) 發生的任何損傷的責任, 同樣, 我也免除接送這位學生參加活動者的責任。

X \_\_\_\_\_  
Signature of Parent/Legal Guardian 家長/監護人簽名

\_\_\_\_\_  
(Date)日期