

Parent/Guardian Health Authorization & Release from Liability

The above health history information is correct and complete. The student herein described has permission to engage in all camp activities except as noted.

I, the parent/guardian of _____ (Student's Name), hereby give permission to the camp to provide routine healthcare, administer prescribed medications, and seek emergency medical treatment, including ordering of x-rays or routine tests. I give permission to the physician selected by the school to secure and administer treatment for the named student including emergency medical or surgical treatment and hospitalization, if necessary.

I will be financially responsible for any medical attention needed during camp or resulting from any injury received at camp.

I HEREBY WAIVE AND RELEASE The British International School, Shanghai, ITS OWNERS, AGENTS, PARTNERS, FACILITY PROVIDERS, AND EMPLOYEES FROM LIABILITY FOR ANY INJURY OR ILLNESS INCURRED WHILE AT CAMP, RESULTING FROM ORDINARY NEGLIGENCE. I UNDERSTAND THAT THERE IS RISK OF INJURY TO THE NAMED STUDENT AS A RESULT OF CAMP ACTIVITIES, AND KNOWINGLY AND VOLUNTARILY ASSUME ALL RISK OF SUCH INJURY. HOWEVER, I UNDERSTAND THAT I AM NOT RELEASING The British International School, Shanghai, ITS OWNERS, AGENTS, PARTNERS, FACILITY PROVIDERS, AND EMPLOYEES FROM GROSS NEGLIGENCE, RECKLESS CONDUCT OR INTENTIONALLY TORTIOUS CONDUCT. TO THE EXTENT THIS RELEASE CONFLICTS WITH CHINESE LAW GOVERNING RELEASES, THIS RELEASE IS TO BE GIVEN THE FULLEST FORCE AND EFFECT PERMITTED UNDER CHINESE LAW. IF THIS RELEASE IS DETERMINED TO BE INVALID UNDER THE LAWS OF THE GOVERNING STATE, THEN THIS RELEASE SHALL BE STRICKEN FROM THIS CONTRACT, BUT ALL OTHER TERMS AND CONDITIONS OF THIS AGREEMENT SHALL REMAIN IN FULL FORCE AND EFFECT.

Name of Parent/Guardian:

Signature / Date

By the above signature, it certifies that I, the Parent/Guardian, whose name is displayed above, agree to the terms stated above, and have taken the time to ensure that ALL information in this REGISTRATION FORM IS UP-TO-DATE AND ACCURATE TO THE BEST OF MY KNOWLEDGE.

.....
PAYMENT INSTRUCTION:

Account Name: The British International School, Shanghai (上海英国学校)

Account Number: 404294-1583600001

Swift Code: ANZBCNSH

Bank Information: ANZ Bank Shanghai Branch (澳新银行上海分行)
22F Raffles City, 268 Xizang Middle Road, Shanghai 200001

Bank Transfer Notes: When you are making payments by bank transfer, please fill 'Summer Tech Camps' as a bank transfer note. Thank you!

A copy of the bank voucher/remittance together with the child's English name should be faxed to us, the fax # is (021) 51901323. Cash payments can only be paid using RMB.