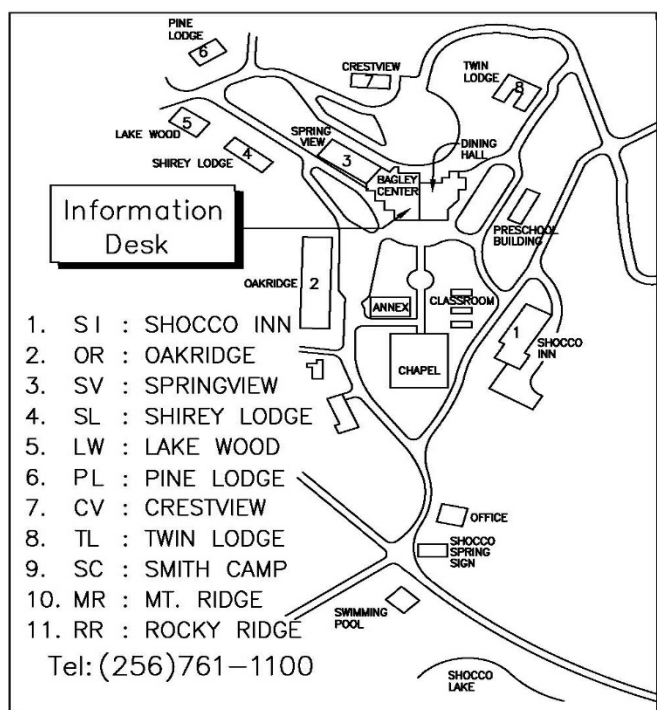


各位弟兄姊妹及福音朋友平安，

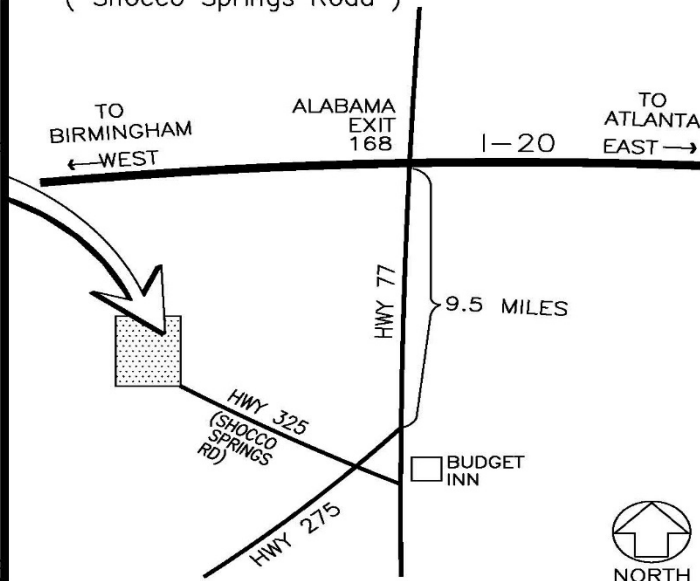
感謝您報名參加今年的福音營，煩請注意以下事項：

- 報到時間為 **3月29日** (週五) 下午 **5:00** 起，為避免週五下午塞車，建議您提早出發；若早到營地可先到湖邊遊覽，或至報到處 **Bagley Center Lobby** 休息
- **營地新要求：大人小孩每位皆需填寫 Waiver Form (下面兩頁)，請盡可能自行印出填好帶去營地；在營地亦可填，但事先填可節省報到時間，謝謝您的合作！**
- **Bagley Center** 報到開始後，請在 **Lobby** 桌上找到自己的名牌，然後去領鑰匙，**請攜帶 \$5 現金做房間鑰匙押金**，以加速報到作業。
- 如有幼兒尚不能放手自己穩定走路的，請父母自行照顧，恕大會無法提供服務。大會會場禁止帶小孩入大堂，及逗留大堂門廳內，以免影響會眾聽道，請有幼兒的父母親諒解與合作。
- **1~2 歲** 幼兒照顧在 **Preschool Building Room 3**，家長需接送。
- **3 歲至 kindergarten** 在大堂地下室，家長需接送。
- **1 年級到 5 年級** 在 **Bagley Center** 二樓 **226 教室** (餐廳入口旁)。**1 到 2 年級** 到家長需接送，**3 到 5 年級** 不必，請家長和孩子事先約好會後見面方式。
- **6 年級及以上** 說英語之青少年節目在 **Bagley Center** 三樓 **300 教室**，不必接送，請家長和孩子事先約好會後見面方式。
- **1 歲至 2 年級** 之兒童家長請在中午, 下午劇坊, 晚堂結束後三時段準時去接孩子，其他時間請不要去探望孩子。
- 營地宿舍無吹風機，請自備。
- 本營地為禁煙、禁寵物營地，並請勿在寢室內烹煮食物，謝謝您的合作！
- 手機全營地只有 **AT&T** 和 **Verizon** 可通，如您的手機不是 **AT&T** 或 **Verizon**，**Bagley Center** 一樓有公用電話。
- 請自備常用藥，營會只提供 **First Aid**，不提供過敏藥、退燒藥、止痛藥、感冒藥等。
- 出發前請注意天氣預報，如暴雨、龍捲風等警告；在營會期間如聽見龍捲風警報響聲 (全營地都可聽到)，請參考地圖，依據以下指示：
 - 在節目進行時間：所有人請到報到處 **Bagley Center** 一樓避難，在大堂 **Chapel** 地下室聚會的兒童，有老師照顧，家長請勿去接。
 - 非節目進行時間：所有人請到報到處 **Bagley Center** 一樓避難。

DIRECTION FOR SHOCCO SPRINGS CONFERENCE CENTER OF ALABAMA



I-20 Exit 168
Take Hwy 77 South
Exactly 9.5 Miles Right Turn to Hwy 275 South
First Intersection Right Turn to Hwy 325
(Shocco Springs Road)



*請注意: 每一位參加者皆需填此表, 謝謝合作! P.1

2019 WAIVER & RELEASE



Participants in events held at Shocco Springs Baptist Conference Center, Inc. (SSBCC) or facilitated by SSBCC staff off campus, may be asked to have a signed and witnessed or notarized Waiver & Release Form, including adults 19 and over. All participants under 19 must have a Waiver & Release signed by a Parent/Guardian and witnessed or notarized, and must be presented at event check-in.

Event Information					
Event Name:	SE Chinese Gospel Conference			Event Date:	3/29-31
Church / Organization Name:	Atlanta Chinese Christian Church				
City:	Tucker	State:	GA	Phone:	770-908-1972
Participant Information					
Participant Name:				Age:	
Address:					
City:		State:		Zip:	
Parent / Guardian:					
Home Phone:			Cell Phone:		
Email Address:					

Consideration: Acknowledge the personal benefits accruing to me (and my child, as applicable) by reason of participation in the above described event and am aware of the activities in which I, or my child, will be involved through said participation.

Photograph/Video Permission: Acknowledge that there may be photographs taken or videotaping during normal event activities, and I hereby grant my permission for such photographs/videos to be taken of me (and or my child) and to be used in promotional materials. I also hereby release SSBCC and its agents and employees from all claims, demands, and liabilities whatsoever in connection with the above.

Release and Indemnity: Acknowledge and agree that I release and forever hold harmless Shocco Springs Baptist Conference Center (SSBCC) as well as their members, trustees, directors, officers, employees, agents, contractors and affiliates (collectively, the "Released Parties") from any and all claims or demands for personal injury, sickness, and death, as well as property damage and expenses, of any nature whatsoever, incurred by me or my minor child while participating in the events and/or while on property leased or owned by SSBCC. I further assume full personal responsibility for any loss of or damage to property to the extent caused by me or my minor child. I also assume full personal responsibility for all medical bills for me or my minor child. I agree to indemnify the released parties from any and all claims and demands for personal injury or death as well as property damage and expenses of any nature whatsoever arising out of the willful or negligent actions or omissions of me or my minor child.

Assumption of Risk: The staff at SSBCC strive to offer fun, safe, and challenging activities that engage the whole person--body, mind and soul. The staff is committed to providing a rewarding experience with safety as our highest priority and have worked diligently to minimize risks involved. However, there are inherent risks to participation in recreation activities including but not limited to, initiative games, high and low challenge course, outdoor education, bazooka ball, paintball, team sports, hiking trails, trail buggies, go-carts, golf carts, segways, and aquatic activities. Participants will be provided proper gear for all SSBCC facilitated activities. You or your child could experience any of the following: elevated heart and respiratory rates, uncomfortable group dynamics, climbing or descending, unpredictable and possibly slick or uneven terrain, crossing narrow wires and logs, jumping, running, climbing/descending steep rock faces, traveling long distances in remote settings, carrying weight on your back and shoulders, riding electrical/gas powered equipment, unforeseen forces of nature or weather, any of which could result in injury/illness that could result in loss of life, limb, and/or property. I am aware of the risks associated with participation in the event(s) and do hereby voluntarily assume full responsibility for any risk of loss, property damage or personal injury, including death, that may result from participation in event activities.

(See SSBCC Recreation Activities Descriptions at www.shocco.org/recreation for full details)

(請翻至背面簽名及證人資料)

*請盡可能在報到前填好此表繳至服務台
以節省時間,謝謝您的合作!
2019 WAIVER & RELEASE



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Medical Emergency: In the event of injury or a medical emergency, I understand that the group's leader, not SSBC staff, will be responsible for the medical care of all attendees. It will be the group leader's responsibility to assess medical needs, obtain and consent to appropriate medical care, transport persons in need of medical care and contact parents or guardians of minors. I release SSBC from any and all liability related to medical treatment. In addition, I assume the risk and financial responsibility for any injury resulting from the attendee's participation in all SSBC events.

Understanding: Represent and acknowledge that (1) I have completely read and understand this document and all its terms and all matters referred to herein, and my signature below is my voluntary, free act and deed, (2) I have had ample opportunity to obtain the advice of counsel, (3) by signing this document, I understand that I am relinquishing legal rights and remedies that may have otherwise been available to me, (4) I understand that the above releases shall be construed as broadly and inclusively as is permitted by applicable law and agree that if any portion of this document is held invalid, the remaining shall continue in full force and effect, (5) to the extent any restriction on filing lawsuits is deemed unlawful, I agree to submit any claims to Christian conciliation/mediation organization for binding resolution, and (6) a copy of this form as signed shall be treated as authentic and binding as the original.

Complete and sign below (Consent by a parent or guardian is required for those under the age of 19).

請簽名
請找一位朋友當證人

Parent or Guardian (For Participant Under 19 years of age)		Participant (19 years of age and over)	
Signature:		Date:	
Printed Name:		Relationship to participant:	

Witness (Required if not notarized)			
I witnessed the participant / guardian listed above sign the above waiver and release.			
Witness Signature:		Date:	
Witness Printed Name:		Relationship to participant:	
Address:			
City:	State:	Zip:	

Notary Information			
The State of:		The County of:	
Before me, a Notary Public, on this day personally appeared:			
Known to me, or proved to me on the oath of:			
to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he executed the same for the purpose and consideration therein expressed. Given under my hand and the seal of the office this:			
	day of	A.D.	
Month		Year	
Notary Public Signature		My Commission Expires:	