

## Application Form (Parenting Programmes)

**Programme Selected** (Please check the box where appropriate.)

|                             |                            |  |                          |
|-----------------------------|----------------------------|--|--------------------------|
| <b>Date of Application:</b> |                            |  |                          |
| <b>Parenting Programme</b>  |                            |  |                          |
| <b>Age Group</b>            | <b>Time</b>                |  |                          |
| 6-18 months                 | 09:00-10:30 every Saturday |  | <input type="checkbox"/> |
|                             | 10:30-12:00 every Saturday |  | <input type="checkbox"/> |
| <b>Commencement Date:</b>   |                            |  |                          |

### Child's Information

|                           |           |
|---------------------------|-----------|
| English Name:             |           |
| 中文姓名:                     |           |
| Date of Birth (DD/MM/YY): | Age:      |
| Nationality:              | Religion: |
| Languages:                |           |
| Residential Address:      |           |

### Parents' Information

|                |                |
|----------------|----------------|
| Mother's Name: | Father's Name: |
| Mobile No.:    | Mobile No.:    |
| Profession:    | Profession:    |
| Email:         | Email:         |

**Helper's / Carer's Information**

|               |         |
|---------------|---------|
| Name:         | Mobile: |
| Relationship: |         |

**Emergency Contact(s)**

|               |               |
|---------------|---------------|
| Name:         | Name:         |
| Relationship: | Relationship: |
| Mobile:       | Mobile:       |

**Other Concerns**

|   |
|---|
| Does your child have any food allergies? (Please specify)                     |
| Does your child have any medical conditions/medical history? (Please specify) |

**How did you hear about us?**

- Facebook
- Homepage
- Friend's referral
- Other: \_\_\_\_\_

**Policy remarks:**

- Please inform us 1 day in advance if your child is unable to attend a class.
- Only one make-up session is allowed per term regardless of the reason.
- All fees and deposits are non-refundable and payable by bank transfer ONLY.

## Accident Waiver & Release of Liability

By signing this Waiver, I assume all risk of my child and/or myself participating in indoor/outdoor Mulberry Tree Academy activities (hereinafter “activity”). Without signing this form, neither myself nor my child will be able to participate in the activity. I acknowledge that the above activity may pose some risk of personal injury and that I undertake and assume this risk for myself and my child.

I am assuming all risks on behalf of myself and my child that may arise from negligence or carelessness on the part of any of the persons or entities being released, as well as from defective equipment, real property or personal property that is owned, maintained or controlled by the above persons.

I certify that my child and I are physically fit and sufficiently prepared for participation in the activity and that there are no health-related reasons or problems which would preclude the participation of myself or my child in the activity. I have not been advised of any reason which would limit my child or myself in participating in the activity.

I understand that I and/or my child may be photographed while participating in the activity. I agree to allow my and my child’s photo, video or film likeness to be used for any legitimate purpose by the activity holders, social media, sponsors, producers and their assigns.

I shall defend, hold harmless, and indemnify the parties from and against all losses, claims, damages, costs or expenses (including reasonable legal fees, or similar costs) in connection with any action or claim brought or made (or threatened to be brought or made), for, or on account of any injuries or damages, received or sustained by myself and/or my child arising during the course of the activity.

I certify that I have read this document, and I fully understand its contents. I am aware that this is a release and indemnification of liability for my child and myself.

## School Policy & Accident Waiver Agreement

I, \_\_\_\_\_ have read, understood  
(Name of Parent/Guardian)

and accept the terms and conditions set forth in this policy

and waiver on this day \_\_\_\_\_.  
(Date)

Name of Child: \_\_\_\_\_

Relationship with Child / Children: \_\_\_\_\_

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

## Consent of Photographing and Filming

From time to time, we may take photographs of the children at our school. We may use these images in our school's prospectus or in other printed publications that we produce, as well as on our website or school media accounts. We may also make video or webcam recordings for school-to-school events, monitoring or other educational use or share on the website or school media accounts.

**By signing this form, I hereby give my consent to Mulberry Tree Academy to take photographs and videos of my child during school hours. I understand and agree that such photographs/videos will be used to document my child's learning and for marketing purposes (on all advertising platforms including social media and printed publications).**

Children's Name: \_\_\_\_\_

Signature of Parent: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Date: \_\_\_\_\_

### PAYMENT INFORMATION (OFFICE USE ONLY)

|  |            |
|--|------------|
| Application Fee:   | HKD 480    |
| <b>Deposit</b> (for Parenting Programme) The deposit is deductible from the last 8 session's tuition fee.<br>**Please note that a 60-day written notice of withdrawal is required for processing.: | HKD 4400   |
| Tuition Fee:   | HKD 4400   |
| <b>Total:</b>  | <b>HKD</b> |
| Payment Date (Bank transfer via BOC#012-591-1-059970-4):   |            |
| <b>Handled by:</b>   |            |
| Remarks:   |            |

20-2-21 version