



# 2002 美東台灣人夏令會報名表

2002 Taiwanese American Conference/East Cost

## Registration Form 報名表

Please return this form with check (payable to TAC/EC, INC.) to:

TAC/EC Registration, 3 Barrett Road, Lexington, MA 02421

e-mail: [njsuray@attbi.com](mailto:njsuray@attbi.com) <http://www.tacec.org/>

<b>Contact Person (Please print or type clearly)</b> (聯絡人資料, 請以正楷填寫清楚)			
Last Name:	First Name:	Taiwanese Name:	
Address:	City:	State:	Zip:
Phone: ( ) -	Fax: ( ) -	e-mail:	

Please check your registration category:  Conference with room/board  Conference & meals only<sup>1</sup>  Conference only<sup>2</sup>  
 (Please use separate registration form for different registration category)

Registrant's Information (Please print or type clearly.) (報名者資料, 包括聯絡人, 請以正楷填寫清楚)															
English Name		Taiwanese Name	Relation to Contact	Sex M/F	Birth Year	Staying night(s) Please ✓			Occupancy		Youth housing <sup>3</sup> (Y/N)	Baby sitting <sup>4</sup> (Y/N)	Dinner Box <sup>5</sup> (Y/N)	Lunch Box <sup>6</sup> (Y/N)	Sub-Total (小計)
Last	First, M.I.					7/4	7/5	7/6	Single	Double					
															\$
															\$
															\$
															\$
															\$
															\$
															\$
Discount (-\$10/per person); must be post marked on or before <b>June 1st</b>														- \$	
Donation to TAC/EC														\$	
Vendor Booth (\$75/Per Table/Per Day)														\$	
<b>Grand Total (總計)</b>														\$	

1. This choice is for those who are staying in the Campus Center Hotel and not in the dormitory. Registrants are responsible for reservation and payments (paid direct to U Mass). Campus Center Hotel: Tel: 413-549-6000 ext. 7714; Rates/night: \$70 single, \$80 double, \$195 suite and \$10 extra per cot. Please make sure the availability of your hotel room(s), and remember to mark your staying nights on the above form so we can prepare your meal card(s) accordingly.
2. This choice only includes all of the Seminars, the Concert and Taiwan Night. No rooms or meals.
3. Youth Housing: Youth must be 12 years or older to stay in youth dormitory. Parents must sign the Parental Permission Agreement on the back of this form.
4. Baby Sitting: available 8:30-11:30 AM and 2:00-5:00 PM (Fri & Sat only) for potty trained 4-5 years old. There will be programs for kindergarten and up.
5. Dinner Box is for late arrival on the first day (7/4).
6. Lunch Box is for convenient departure on the last Day (7/7).

### Notes:

1. Fees (報名費)

Registration Categories	Adult ( 11 and older)		Children (4~10-yr old)
	Double occupancy	Single occupancy	Double occupancy
Conference + room & board (3 days)	\$ 225	\$ 255	\$ 200
Conference + room & board (1-2 days)	\$ 185	\$ 215	\$ 160
Conference and meals only (3 days)	\$ 165		\$ 165
Conference and meals only (1-2 days)	\$ 125		\$ 125
Conference only (1, 2 or 3 days; no meals)	\$ 80		\$ 80

2. Children born after **July 3, 1998** are free of charge, but get no bed, meal ticket or baby sitting.
3. Deadline for Registration: **June 12, 2002**.
4. Refund Policy: 100% if before 5/31/2002; 75% if before 6/12/2002; **NO REFUND** after 6/12/2002.
5. Room and meals are not guaranteed for Walk-in Registration.

**Thank you for registering for TAC/EC 2002.**  
**We are looking forward to seeing you at U. Mass, Amherst!**

• **Parental Permission Agreement**

I, \_\_\_\_\_ (parent’s name) hereby give my son/daughter  
\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ (children’s  
name) the permission to stay in youth dormitory.

**Parent(s) or guardian’s signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

• **Medical Emergency Agreement Statement**

In case of a medical emergency, I hereby give permission for a health service physician to hospitalize, secure proper treatment, and to order injections or minor surgery for my child (children), as named below:

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Name: \_\_\_\_\_ Name: \_\_\_\_\_

**Parent(s) or guardian’s signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

• **Resident Advisor (RA) & Group Leader (GL) Application**

We are seeking both female and male RAs, of ages 16 and older, to guide their younger fellow Taiwanese Americans through the Conference program and daily schedule. For those with more initiative or existing experience, we also require female and male GLs, ages 18 and older, who can act as facilitators in discussions and similar workshops. If you are interested in either or both roles, please complete the blank lines and return along with your registration, or contact Tommy Tan once you have committed to attending the Conference, at [tan\\_tommy@yahoo.com](mailto:tan_tommy@yahoo.com) or 781-425-6451. No experience is required and training will be provided at the RA Retreat, but you must be able to attend the Retreat on June 15-16, 2002 (specific New England location to be announced.)

Name(s): \_\_\_\_\_ Age(s): \_\_\_\_\_

I volunteer to be a: RA\_\_\_ GL\_\_\_ (Check all that apply)

Phone: \_\_\_\_\_ City, State: \_\_\_\_\_ E-mail: \_\_\_\_\_

Please list any relevant experience, qualifications, or skills–e.g. certifications, awards, self-development, and accomplishments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please describe your interest/purpose in being a RA/GL and what you wish to gain from this experience (be specific):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_