加拿大多倫多長生學會
LONGEVITOLOGY TORONTO CANADA

3320 Silver Star Blvd, #222, Scarborough, Ont, M1V 1R4
Web site: https://longevitologytoronto.ca
Email : longevitology.tor@gmail.com
Phone: 416-930-9128

相片
呎吋
Photo

7/8'' x 1-1/8"

2018 年高級班學員報名表
2018 Advance Class Application Form

For Longevitology use only
Reg. # 18-
Date
學號 LTC # A-

Last Name:_____ First Name: _____

中文姓名: _____職業&公司/Occupation & Company:_____

以國語授課，國/粵語見証, 若需傳譯機，請選 ☐ 國/粵語 或/or ☐ English
The course is in Mandarin, please select if interpretation service is required

上課派發書本有中文及英文版，請選一. ☐ 中文 或/or ☐ English
Please select textbook language preference (one only)

出生日期/Date of Birth: _____日 DD_____月 MM_____年 YY ☐男/Male ☐女/Female

地址 Address: _____ 城市 City:_____ 郵區編號 Postal Code:_____

住宅電話 Phone No: _____ 手機 Cell: _____ 電郵 E-mail: _____

- **本課程不收報名費、學費，但上課所有的行政支出，由學員自由樂捐來分擔場地、課本,老師及開穴師來往機票等費用。歡迎大家隨緣樂捐贊助。** *There is no application and course fees for this course. However, the expenses associated with administering the course can be contributed on a voluntary basis by the students, to help in sharing of the rental expense of the venue, printing cost of course material and Master Wei and his assistants' travel expenses. We welcome your voluntary sponsorship and donation.*
- 學員必須簽署「學員協議書」並與本報名表同時遞交。
- Student must sign the Longevitology Toronto Student Agreement and submit it together with this application.
- 學員在此同意放棄長生學的體會及心得文章擁有權
- Student hereby waive the right of his Longevitology Report
- 學員申請將由加拿大多倫多長生學會評核，並保留取决權。Your application will be verified and approved upon the discretion of the Longevitology Toronto Canada. We reserve the right to accept or reject the applications.
- 主辦單位對學員不負任何事故的法律責任。學員簽字同意放棄一切法律訴訟主辦人及主辦單位的權利。The signatory hereby agrees to assume full and complete responsibility for personal safety and personal property during the course and other Longevitology activities. I hereby waive any right to bring legal action against Longevitology Toronto for any loss or injury under any circumstances. Details are listed on the Student Agreement to be submitted together with this application form.

簽名 / Signature: _____ 日期 / Date: _____

課程 / Course	日期及時間 / Date and Time	上課地點 / Class Location
高級班 Advance class	5 月 15-19 日 每晚 6:00pm-9:30pm May 15- 19, 2018 6:00pm-9:30pm	多倫多華諮處總部 / Toronto CICS Head Office 2330 Midland Ave, Scarborough, Ontario M1S 5G5

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For Longevitology use Only:

表格核對 Form verified by:

	1.初中班證明	2.近照 2 張	3.體會心得	4.調整時數	5.導讀班	6.製服呎吋	7.$50 費用	8.面試日期
完成								
備註								
審核								