



拉法加拿大基督教發展中心
Rapha Christian Development (Canada) Association
「退修營資助」申請表 “Camp Subsidy” Application Form
(2019 年 4 月更新 Updated Apr 2019)

「拉法加拿大基督教發展中心」(簡稱「拉法」)乃加拿大註冊非牟利機構。為確保善用有限的資源，並有效的支持有需要的朋友，請耐心細閱以下事項及填寫資料。謝謝！“Rapha Christian Development (Canada) Association” (or “RAPHA” in short) is a Canadian registered Non-profit Organization. To ensure the best use of limited resources, and effectively support those friends in need, please read the following items carefully and fill in the information. Thank you!

注意事項 Important Notes :

1. **目的：**專為參加「拉法」開辦的退修營，卻未能負擔全部費用的申請人而設。 **Purpose:** Specifically designed for Applicants who would like to participate in “Rapha” Camps, but are not able to pay the full cost.
2. **要求：**申請人必須參加整個退修營。如未能完成以上要求者，日後報名參加本會退修營時，將不會接受「拉法」退修營資助的申請。 **Requirements:** The Applicant must attend the entire Camp. If the above requirements are NOT fulfilled, future Subsidy Application for “Rapha” Camps will NOT be accepted.
3. **資助金額：**上限是「退修宿營」報名費之 50%，或「退修日營」報名費之 80%，但不少於營地所收取的費用及組長交通費。 **Subsidy Amount : Maximum Amount is 50% of “Overnight Camp” Fees, or 80% of “Day Camp” Fees, but not less than the Fees charged by the Camp Site plus Transportation Fee for Group Leaders.**
4. 申請人請按個人經濟能力填寫可負擔的費用，但不少於資助金額上限。 Applicant is to fill in the Affordable Amount of Camp Fees according to his/her financial ability, but not less than the Maximum Subsidy Amount.
5. 如經審批獲准，請於退修營前 4 星期內繳付所承諾可負擔的金額；否則，必須要在退修營前 2 星期內繳付全費。
If the Application is reviewed & approved, please pay the agreed Affordable Amount within 4 weeks before the Camp; otherwise, you must pay the Full Camp Fee within 2 weeks before the Camp.
6. 申請表必須在優惠期內遞交方為有效。 The Application Form must be submitted within the Early Bird period to be valid.
7. 申請人必須真實填寫本申請表，提供必要的資料作為「拉法」對有關申請作出評估審批。 The Applicant must fill out this Application Form truthfully, and provide the necessary relevant information for “Rapha” to evaluate the Application.
8. 如能獲申請人所屬教會證明其經濟能力及需要，將有助「拉法」的審批程序，其他官方文件（例如：工資單）或相關的參考信件亦可以接受。 It will assist “Rapha” in the approval process, if the Applicant can provide additional supporting documents from the Affiliated Church to substantiate his/her financial status & needs; other official documents (eg. pay stub) or relevant Reference Letters are also acceptable.
9. 申請人所提供的有關資料，「拉法」只會用作以上用途，並將會絕對保密。 The relevant information provided by the Applicant, will only be used by “Rapha” for the above purposes, and will be kept strictly confidential.
10. 申請成功與否，將由「拉法」作最終決定。 "Rapha" will make the final decision, whether the Application is approved or not.

資助申請資料 Subsidy Application Information :

◆ 退修營編號 Camp Code : _____ 日期 Camp Dates : _____ 名稱 Camp Name : _____

◆ * 申請人可負擔之費用為 Affordable Amount by the Applicant (CAD / USD) : \$ _____



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- ◆ 以前曾申請「拉法」課程/退修營資助? Have you applied for Subsidy in previous Rapha Course/Camp? ☐ 否 NO ☐ 是 YES

(請註明課程/退修營編號及名稱) Please state the Course / Camp Codes & Names _____

個人資料 Personal Information :

姓名: (中文) Chinese Name _____ (英文) English Name _____

性別 Gender: 男 M / 女 F 駕駛執照號碼 Driver License #: _____

年齡 Age: _____ 職業 Occupation: _____

電話 Tel #: (住宅 Home) _____ (辦事處 Office) _____ (手提 Cell) _____

地址 Address: _____

家庭及經濟狀況 Family & Financial Status :

- ◆ 婚姻狀況 Marital Status: ☐ 單身 Single ☐ 已婚 Married ☐ 分居 Separated ☐ 離婚 Divorced

☐ 喪偶 Widow / Widower ☐ 其他 Others (請註明 Please specify) _____

- ◆ 需要供養之家庭成員人數共 # of Family members supported in Household ____人, 包括 Include (請圈出 Please circle):

配偶 Spouse/父母 Parent/子女 Children/祖父母 Grandparent/其他 Other (請註明 Please specify) _____

- ◆ 申請人每月平均收入 Applicant Monthly Income: CAD/USD \$ _____, 支出 Expense: CAD/USD \$ _____

- ◆ 申請人正在待業? Applicant currently seeking employment? ☐ 否 NO ☐ 是 YES 請列明: 對上一份工作結束日期是

Please specify: Date of Last Employment ____年 Year ____月 Month, 每月收入 Monthly Income CAD/USD \$ _____

儲蓄估計可供使用約 Estimated Savings can last approximately ____月 Months。

- ◆ 家庭平均每月總收入 Monthly Household Income: CAD/USD \$ _____, 總支出 Total Expense: CAD/USD \$ _____

信仰狀況 Religious Status :

- ◆ 宗教信仰 Religion: _____ 所屬教會 Affiliated Church: _____

受浸日期 (如有) Baptismal Date (If applicable): _____

- ◆ 穩定出席所屬教會聚會已有 Years of regular attendance at the above Affiliated Church _____年 Years.

- ◆ 有否所屬教會證明你的經濟能力、需要及穩定出席教會的聚會? Do you have the above named Affiliated Church to

substantiate your financial status, needs and regular attendance? ☐ 否 NO ☐ 有 YES _____



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☐ 提供其他證明文件 Other Relevant Documents submitted _____

本人同意及明白上述之申請退修營資助說明。I agree and understand the above terms for Application of Camp Subsidy.

申請人姓名 Name of Applicant : _____ 申請人簽署 Signature of Applicant : _____

填表日期 (年-月-日) Application Date (Year-Month-Date) : _____

本欄只限拉法辦公室內部填寫 For RAPHA Office Internal Use Only:

審批者姓名 Name of Approver : _____ 審批者簽署 Signature of Approver : _____

審批日期 Approval Date : _____ Max. Subsidy Amt 資助金額上限 : CAD/USD \$ _____

☐ 獲批核金額 Approved Amount : CAD/USD \$ _____ 付款方式 Payment Options : _____

☐ 不獲批核 REJECTED 備註 REMARKS: _____