### 馬利蘭中華聖經教會 Chinese Bible Church of Maryland

## Application for Financial Aid to Church Retreat

# 教會退修會補助金申請表

#### **Notes To the Applicant:**

- 1. CBCM only provides financial aids to Christians who attend our church regularly. You may use the same form to request financial aid for your child who is below college age. Anyone who is above high school age must be a Christian and must fill out his/her own application.
- 2. Only a completed application with signature will be accepted. When the Retreat Committee disapproves your application, you may appeal to the Committee for re-consideration within 1 week of disapproval notice.
- 3. The applicant must submit the application to the Retreat Committee by <u>5/5/2024</u> or make a photo copy and email to cbcm-retreat@cbcm,org.

#### 申請人須知

- 1. 這補助金只提供給定期參加本教會主日聚會的基督徒. 如果你有高中以下的兒女,不論是否基督徒,可在同一張表內申請補助. 凡高中以上者,必須是基督徒,也必須自己單獨填寫申請表.
- 2. 申請表必須填寫完全,並在底部簽名. 申請表填寫不完全,將不被接受. 如果退修會部門拒絕你的申請,你可在一星期內,向退修會部門申訴理由,請求再次考慮.
- 申請表必須在 5/5/2024 以前送給退修會委員會.或手機拍照後,電郵至 cbcm-retreat@cbcm.org

### Retreat Financial Aid Application Form 退修會補助金申請表

Applicant Name (Last, First, Middle) 申請人姓		Gender 性別 □ M □ F 男 女		Date o	f Birth 出生日期	Phone Number 電話
Street Address 地址	<b>_</b>		City 城市	1	State 州	Zip 地區號碼
Personal Information 個人資料						
Are you a Christian? 你是否基督徒?				□ Yes 是	No□ 否	
Is your spouse a Christian? 你配偶是否基督徒?				□ Yes 是 ;	No □ 否	
How often do you attend CBCM Worship Service during the past year? 在過去一年中,你曾參加幾次本教會主日崇拜?						
Do you have a job? If yes, part time or full time? 你有工作嗎? 全時或半時?				□ Yes 是	□ No 否	□ Part 半時, or □ Full 全時
How much financial aid do you request for? (Indicate either dollar amount or a percentage to the retreat cost) 你想申請多少補助費? (指出實際需要費用金或全額的百分比)				\$	, or%	□ 25%, □ 50 %, or <u>%</u>
Other information you could provide which may be helpful to the Committee to evaluate your request (if additional space is needed, please attach your explanation on a separate sheet.): 如有其它資料可協助籌備會審核補助金之需要.請詳列・(如果空間不足,請另付一頁.)						
Applicants Who Are Below College Age and Require Financial Aid 高中以下孩童需要費用金補助						
Children Name (Last, First, Middle) Sex性 孩童姓名 □ 州 男		Date of Birth 出生日期	Is a Christian 口Yes, or 是	? 是否基督徒?	Amount requested	補助金申請數额  %, or \$  -
Children Name (Last, First, Middle) Sex性 孩童姓名 □ M 男	生別	Date of Birth 出生日期	Is a Christian Yes, or 是	? 是否基督徒?	Amount requested	補助金申請數额 %, or \$
Children Name (Last, First, Middle)  孩童姓名  Sex性  男	☐ F	Date of Birth 出生日期	Is a Christian Yes, or 是	? 是否基督徒?	Amount requested	補助金申請數额 <u>%,</u> or \$
Applicant Signature 申請人簽名: Date日期:						