Please complete the renewal process v You are requesting that TYPA issue a gate pass to the follo	ol year, and will deactivated every May. with the TYPA office during summertime. owing individual:
	owing individual:
Helper's First Name: H	
	lelper's Last Name:
Helper's ID Number (ARC or Passport Number)	
This individual may enter the TAS campus to pick up your	child/children.
Child/Children's Name:	·
TYPA Family ID Number:	
You hereby agree that you shall return the TYPA gate pass	s to the TYPA office upon:
1. TYPA's request for the return of the pass	
2. Member's withdrawal from TYPA	
3. You no longer desire your Representative to hold the p	bass.
on the TAS campus, at a TYPA event, and/or holding or us authorized or requested your Representative to use the gat agree to and hereby unconditionally indemnify and hold he agents from all liabilities, damages, injuries, claims, expen or in connection with the issuance of the TYPA gate pass to	
	Print name (Parent):
T Y P A	Parent signature:
Taipei Youth Program Association	Date: