

REGISTRATION FORM

PARENTS/GUARDIANS INFORMATION家長

English Name: _____ Chinese Name: 中文姓名 _____
Address: _____ Home Phone : _____
City: _____ Zip: _____ Business Phone: _____
E-mail: _____ Cell Phone: _____

STUDENT INFORMATION

English Name	Chinese Name	Birth date	F/M	Fees *
英文姓名	中文姓名	生日	性別	費用
1 st Child				\$250
2 nd Child				\$220
3 rd Child				\$190
Book and Supply Fee (Each child)				\$50.00 (EA)
Total				

*Fees cover one 15-week (one semester), 2 hours per class session. Tuition costs per Semester, 15 weekly

* classes are as follows:

1st child \$250

2nd child discount \$30

Book & supply \$50 per year per student

Prorated tuition can be refunded if student withdraws from the program before the end of the first month. A \$100 early withdrawal penalty will apply. No tuition refund will be given after 4 classes. Registration fees are non-refundable.

A \$30 discount is available for students that pre-pay for the full year. In the case of an early withdrawal, the \$30 discount will be deducted from the refund in addition to the early withdrawal penalty.

I give permission for my child's pictures to be used for school promotion.

FOR NEW STUDENTS ONLY (新生請填寫。舊生免填)

(1) Have you ever been to any School, name? Yes No _____

What level of Chinese textbook studied? _____

(2) Does student speak or understand Chinese? Mandarin Cantonese Other

Please notify the school immediately of any changes of information on this form. In the event parents or designated physician cannot be reached, personnel of the school are authorized to use their discretion to secure medical aids. I agree to indemnify and hold harmless the Mei Hua Chinese School, school board, director, officers, teachers, and agents from any liability, claims, or action arising out of participation in the classes or activities.

EMERGENCY CONTACT INFORMATION

Parent's/guardian's Name _____ Home Phone _____
(with whom student resides)

Father's/Guardian's Name _____ Work# _____ Cell Phone _____

Mother's/Guardian's Name _____ Work# _____ Cell Phone _____

If Parent/guardian cannot be contacted, please contact:

Name _____ Phone#(s) _____

MEDICAL INFORMATION:

1) Student Name _____ Birth date _____ Class _____
Last First MI
Physician _____ Phone _____ Hospital Preference _____
Allergies _____ Regular Medications _____
Chronic Illness/Disabilities _____ Eye Glasses() Contact Lens()
Recent Injuries/Surgeries (within last year) _____
Other past injuries, Illnesses or limitations that the school should be aware of _____

2) Student Name _____ Birth date _____ Class _____
Last First MI
Physician _____ Phone _____ Hospital Preference _____
Allergies _____ Regular Medications _____
Chronic Illness/Disabilities _____ Eye Glasses() Contact Lens()
Recent Injuries/Surgeries (within last year) _____
Other past injuries, Illnesses or limitations that the school should be aware of _____

3) Student Name _____ Birth date _____ Class _____
Last First MI
Physician _____ Phone _____ Hospital Preference _____
Allergies _____ Regular Medications _____
Chronic Illness/Disabilities _____ Eye Glasses() Contact Lens()
Recent Injuries/Surgeries (within last year) _____
Other past injuries, Illnesses or limitations that the school should be aware of _____

PARENT/GUARDIAN, PLEASE READ AND SIGN BELOW:

Please note that in order to provide a safe and healthy environment for your child, this information will be available to the following people: Principal, nurse, teachers, and authorized volunteers.

As a parent or legal guardian, I authorize a licensed physician to examine the above named student and in the event of injury to render such emergency care as she/he deems necessary for the treatment of such injury, including consultation and treatment by a specialist, including a surgeon. I understand that every reasonable effort will be made to transport the above named student to the most accessible hospital or doctor. .

Date _____ Signature _____
(Mother/Guardian) (Father/Guardian)

美華中文學校
Mei Hua Chinese School

PAGE

Mei Hua Chinese School Mailing Address: P.O. Box 28494, Bellingham, WA 98228
HYPERLINK "mailto:info@meihuaschool.org" \t "_blank" info@meihuaschool.org

美華中文學校
Mei Hua Chinese School

Mei Hua Chinese School Mailing Address: P.O. Box 28494, Bellingham, WA 98228
HYPERLINK "mailto:info@meihuaschool.org" \t "_blank" info@meihuaschool.org