



Kwong Kow Chinese School
中華廣教學校

2017-2018 Weekend Program Registration Form 週末班入學註冊表

Student Name 學生姓名 (English) _____ (中文) _____ KKCS Student # _____

Date of Birth 出生日期: _____ Age 年齡: _____ Gender 性別: _____

English School Grade in 2017-2018 英文學校年級: _____ Name of Day School 英文學校名稱 _____

Parent's Name 家長姓名: (English) _____ (中文) _____

Address 地址: _____ Email 電郵: _____

Home Phone 家中電話: _____ Mobile Phone 手機: _____

How did you hear about our Summer Program? 你如何得悉廣教學校暑期班的資料? _____

Please check your class selections below 請選擇以下課程:

- | | | |
|---|--|-------------------------------------|
| <input type="checkbox"/> Language & Culture 中國語文及文化 | <input type="checkbox"/> Saturday 星期六 | <input type="checkbox"/> Sunday 星期天 |
| <input type="checkbox"/> Language & Culture- Beginning Cantonese 中國語文及文化 -粵語基礎班 | <input type="checkbox"/> Saturday 星期六 | <input type="checkbox"/> Sunday 星期天 |
| <input type="checkbox"/> AP 中文考試輔導 | | <input type="checkbox"/> Sunday 星期天 |
| <input type="checkbox"/> Chinese Dulcimer (Yangqin) 揚琴 | <input type="checkbox"/> Chinese Zither (Guzheng) 古箏 | |
| <input type="checkbox"/> Saturday 星期六 | | |
| <input type="checkbox"/> Beginning Violin 小提琴初級班 | <input type="checkbox"/> Saturday 星期六 | |
| <input type="checkbox"/> Dance 舞蹈 | <input type="checkbox"/> Saturday 星期六 | <input type="checkbox"/> Sunday 星期天 |
| <input type="checkbox"/> Children's Art Studio 巧巧手兒童繪畫室 <u>Please Circle Class: 1 2</u> | <input type="checkbox"/> Saturday 星期六 | <input type="checkbox"/> Sunday 星期天 |
| <input type="checkbox"/> Watercolor & Drawing 水彩及素描 <u>Please Circle Class: 1 2</u> | <input type="checkbox"/> Saturday 星期六 | <input type="checkbox"/> Sunday 星期天 |
| <input type="checkbox"/> Lion Dance & Kung Fu 舞獅及功夫 | | <input type="checkbox"/> Sunday 星期天 |
| <input type="checkbox"/> Chinese Painting and Calligraphy 中國水墨畫及書畫 <u>Please Circle Class: 1 2</u> | <input type="checkbox"/> Saturday 星期六 | <input type="checkbox"/> Sunday 星期天 |
| <input type="checkbox"/> English/Math Enrichment 英數進階 <u>Please Circle Grade: K 1 2 3 4 5 6 7 8</u> | <input type="checkbox"/> Saturday 星期六 | |
| <input type="checkbox"/> ACT/SAT Reasoning & Subject Test 大學入學試 | <input type="checkbox"/> Saturday 星期六 | |
| <input type="checkbox"/> ISEE Supplement ISEE 補充課題 | <input type="checkbox"/> Saturday 星期六 | |

Parent/Guardian Permission 家長及監護人同意書

As a parent or legal guardian, I give permission for the registrant to participate in all activities and off-site trips conducted by KKCS. I understand and agree to abide by all KKCS policies and regulations. I hereby release and discharge the Kwong Kow Chinese School and its officers, employees, agents, and volunteers from any and all claims for accidents during the program. In case of emergency, I give permission to Kwong Kow Chinese School to administer first aid or send my child to the emergency room for treatment. I understand that every effort will be made to contact me in the event of an emergency requiring medical attention for my child. 作為家長及監護人，本人同意我的孩子參與中華廣教學校暑期班的課程及活動。我理解、同意、並遵守學校制訂的規章制度。若發生意外事故，校方不須負任何法律責任。在緊急情況下，本人願意允許學校將我的孩子送到醫院急症室進行治療。

As a parent or legal guardian, I authorize the use of pictures, images and likeness for reasonable use and incorporation by Kwong Kow Chinese School for informational and media use in connection with the Kwong Kow Chinese School website and media outreach to the general public. 作為家長及監護人，我同意學校將我的孩子的照片及影像發佈在校刊、網站、廣告和宣傳材料上。

Tuition is non-refundable unless there is an unexpected *and* unavoidable circumstance.

除非有突發又無可避免的特殊情況，否則，已繳費恕一律不得退回。

Parent's Signature 家長簽名: _____ Date 日期: _____

(以下由學校填滿 For Office Use Only)		Registration # _____
收費 Payment: \$ _____	現款 Cash _____	支票 Check No.: _____
		信用卡 Credit Card Transaction No.: _____
Registration Form checked by: _____	Date: _____	Fee received by: _____
		Date: _____

First Aid and Emergency Medical Care Consent Form

急救和緊急醫療同意書

In case of emergency, I give permission to Kwong Kow Chinese School to administer first aid or send my child to the emergency room for treatment. I understand that every effort will be made to contact me in the event of an emergency requiring medical attention for my child.

在緊急情況下，本人允許學校將我的孩子送到醫院急症室進行治療。

Name of Child's Physician 醫生姓名: _____ Phone Number 電話: _____

Address 地址: _____

My child has known allergy (allergies) to: 我的孩子對 _____ 過敏

I give permission for KKCS to administer the medications listed on the "Medication Consent Form".

本人允許學校給我的孩子服用「服用藥物同意書」上之藥物。

Emergency Contacts (in the order to be contacted) 緊急連絡(請以聯絡先後次序排列):

1. Name 緊急聯絡人姓名: _____ Relationship to Child 關係: _____

Address 地址: _____ Phone 電話: _____

Do you give permission for child to be released to this person? 你是否允許此聯絡人為你接你的子女? Yes 是 No 否

2. Name 緊急聯絡人姓名: _____ Relationship to Child 關係: _____

Address 地址: _____ Phone 電話: _____

Do you give permission for child to be released to this person? 你是否允許此聯絡人為你接你的子女? Yes 是 No 否

Student Transportation Plan and Authorization 學生接送許可書

At daily dismissal time, my child will... 我的子女從廣教學校下課後將會...

_____ be picked-up by parent 由家長接放學 _____ walk home by him/herself 自己步行回家
_____ go home via other means 以其它方法回家 (Describe 說明: _____)

I give my permission to the following people to pick up my child at the end of the day.

我允許下列的家人或朋友下課後為我接我的子女。

1. Name 姓名: _____ Relationship 關係: _____

Address 地址: _____ Phone 電話: _____

2. Name 姓名: _____ Relationship 關係: _____

Address 地址: _____ Phone 電話: _____

3. Name 姓名: _____ Relationship 關係: _____

Address 地址: _____ Phone 電話: _____

KKCS requires that transportation requests be stated in writing and maintained in the child's file. I understand that unless the school is otherwise notified in writing, the plan detailed above will be implemented.

如以上接送計畫有所更改，家長必須以書面通知學校。

Parent's Signature 家長簽名: _____ Date 日期: _____