

守仁中文學校

SHOUREN CHINESE SCHOOL

www.srchinese.org 510-255-5772 P.O. Box 6005, Albany, CA 94706

2021-22 Student Registration Form 學年入學申請表

Last Name	First Name		7文姓名			
Date of Birth 生日/(mm/dd/yy)		Male 男□ Female 女□				
☐ New student ☐ Returning st	cudent Sibling at Shouren, N	ame:				
Class at Shouren 2020-21 去年在	守仁班級 Class intended	for 2021-22	要上的班級 _			
Primary language at home 家中主	要語言 □English 英語 □Manda	rin 國語/普達	通話 □Canto	nese 廣東	話 □other	
1. Parent/Guardian 父親		中文/	名			
Street Address 地址		City		CA		
Home Phone 電話()	Cell Phone 手機()				
Email						
2. Parent/Guardian 母親		中文/	名			
Street Address 地址		City		CA		
Home Phone 電話()	Cell Phone 手機()				
Email						
Emergency Contact 緊急聯絡人	Tel 電話		Relatio	onship 關金	條	
Emergency Contact 緊急聯絡人	Tel 電話	Relationship 關係				
I understand by signing this registration School program. I authorize Shouren C treatment and any bill/fee at my own etheir teachers, staff members and school	chinese School to take full charge of mexpense. I further agree that I will not	y child in case hold Shouren	of emergency. Chinese Schoo	I agree to	pay all medical	
*Last day to request a refund is 10/2/2	2021					
Parent/Guardian Signature 家長簽名_			Date	/	/	
Tuition/Fee 學費/材料費:						
Registration Fee (non-refundable)	註冊費(無退	· 款)	\$25			
Language Class Tuition	學年學費		\$500			
Textbook/Material Fee	書本/材料費		\$45			
Parent Volunteer Deposit (per family)家長義工保證金(每個家庭) (Volunteer deposit will be refunded when you fulfill annual volunteer assignments)			\$80 Total \$			
Total amount paid \$	Check #R	eceived by		Date_		