

紐約華僑學校暑期班學生註册登記表 NEW YORK CHINESE SCHOOL SUMMER PROGRAM STUDENTS REGISTRATION FORM

學生中文姓名 Student Name(Chinese):		學生英文姓名 Student Name(English):				
出生日期 Date of Birth:		年龄 Age:		性別 Sex:		
家長/監護人姓名 Parent/Guardian's Name: 與學生的關係			Relationship:	家長/監護人的電話號碼 Parent's Phone:		
地址 Address: 家長/監護人的電子郵件 Parent's email:						
人口統計信息 DEMOGRAPHICS						
族裔 Ethnicity:						
│ □American Native 美洲原住民 □Asian 亚裔 □African American 非裔美国人 □Hispanic/Latino 西班牙裔/拉丁裔						
□Native Hawaiian/Pacific Islander 夏威夷原住民/太平洋岛民 □Caucasian 白人 □Other 其他						
□Choose not to response 選擇不回應						
籍貫 Place of Origin:				L	家使用的主要語言/方言 Primary anguage/Dialect Spoken at Home:	
國家 Country 省份Pro	vince	城市	ក City			
緊急聯絡人資料 EMERGENCY CONTACT INFORMATION						
姓名 Name: 關係 Relati	onship:	主要聯係智	電話 Phone:	:	其他聯係電話 Alternate Phone:	
課程報讀 CLASS SELECTION						
*請勾選報讀的時間段 Class Session:						
□全天班 Full-day Class, 9am-4pm □半天班 Half-day Class,9am-1pm						
*請勾選是否需要報讀課前托兒或課後托兒 Early Drop-off / Extended Hours:						
□課前托兒 Early Drop-off, 8am-9am □課後托兒 Extended Hour, 4pm-5pm □課後托兒 Extended Hours, 4pm-6pm						
*請勾選報讀的中文年級 Chinese Grade:						
□幼稚園低班Pre-K □幼稚園高班K □一年級1st □二年級2nd □三年級3rd □四年級4th □五年級5th □六年級6th						
*如果你的孩子報讀一年級以上的全天班,請選擇一門選修課程 If your child is enrolled for full-day class and is a 1st grader and up, please choose one of the following extracurricular activities:						
□英文數學輔導 English and math tutoring, 年級 grade: □繪畫 Drawing □美勞 Art & Craft						
□跳舞 Dance □功夫 Kung Fu □體育運動 Sports □表演 Acting						
家長/監護人同意書 PARENT/GUARDIAN CONSENT						
我授權紐約華僑學校的工作人員在必要時為我的孩子獲取急診醫療救治,並同意接受任何有執照的醫院、診所或醫生的緊急治療。我了解在此情況下工作人員會盡最大努力聯係我。 In the event of an accident/emergency, I authorize school staff to request assistance from paramedics and consent to any emergency treatment by a duly licensed hospital, clinic or doctor.						
□ 是,我允許 Yes, I give my permission □ 否,我不允許 No, you do not have my permission						

(請翻到背面繼續填寫註冊表)

放學後,我允許我的孩子可以自 My child has permission to wall		i.	
□ 是,我允許 Yes □ 否,我	战不允許 No		
我允許紐約華僑學校的工作人員 I give permission for my child to The photos and videos can be	o be photographed or oth	herwise recorded during sch	E僑學校的推廣材料。 ool hours' events and activities.
□ 是,我允許 Yes, I give my p	permission	□ 否,我不允許 No, you	do not have my permission
HEALTH INFOR		尔孩子情況相符的選項) any of the following that pertai	n to the participant.)
□ 對食物過敏(請註明)Allerg	jies to food(please speci	fy):	· · · · · · · · · · · · · · · · · · ·
□ 其他過敏(請註明)Allergies	other(please specify):		
□ 哮喘 Asthma □ 身體殘疫	₹ Physical Disabilities ☐]個別化教育計劃 Individuali	zed Education Plan
□ 糖尿病 Diabetes □ 抽搐/缛	癲癇 Convulsions/Seizur	res 🗌 行为/情绪问题 Behav	vioral/Emotional Issues
□ 充血性疾病(例如:心雜音、	心臟病、血压不正常)	Congestive Illness (e.g., heart	murmur/disease, blood pressure)
* 是否有需要治療或服用藥物的 ment and/or medication?	特殊健康護理需求? Doe	es your child have special he	ealth care needs that require treat-
□ 否 No □ 是 Yes (如果是,	請註明 If so, please speci	fy):	
* 是否在服用治療某种疾病的药	物? Does your child take r	medication for any condition or i	llness?
□ 否 No □ 是 Yes (如果是,	請註明 If so, please speci	fy):	
* 是否不能參加某些活動? Are tl	nere any activities your chil	d cannot participate in?	
□ 否 No □ 是 Yes (如果是,	請註明哪些活動 If so, ple	ease specify):	
銀行退票 Bounced Check Fee:			
健康體檢表 Health Examination	n Form:體檢表必須在開 按時提交而造成 Health Examina	t延遲上課,本校概不負責任 [·] ation Form has to be given ir	不能開始暑期班課程。如因體檢表未
退費規定 Refund Policy:	four crilia is una	albe to start the program. Ot	ar scribbins not responsible for any los
開學前申請退學,家長需支付\$			ill he emplied
If you request to drop out befo 開學一週內(7月12日前)申請退			
			017), \$100 administrative fee will be applied.
開學一週後申請退學,將不會退		competer starts all related	face are non refundable
If you request to drop out later		semester starts, all related	lees are non-relundable.
我在此簽名確認我了解並同意 By signing this form I hereby ad		ully understood and agreed	to the terms and conditions above.
Parent/Guardian 家長/監護人	·	(Mr. See 2)	
		(签名 Sign)	(日期 Date)
For School Use Only 由收款			
學生編號:	收據號碼:		\ :
支票號碼:	收款人簽名:	日期	: