

# 查尔斯顿中文学校 2018-2019 年秋季注册表

## Chinese Language & Culture Center 2018-2019 Fall Semester Registration Form

学校地址 School address  
2325 Charleston Regional PKWY  
Charleston, SC 29492

### 学生信息 /Student information:

学生姓名/Student name ( first name) \_\_\_\_\_ (last name) \_\_\_\_\_ (boy /girl)

(中文姓名) \_\_\_\_\_ (姓) \_\_\_\_\_ (名) (男/女)

生日/Birthday \_\_\_\_\_ (月/日/年) (MM/DD/YYYY)

现读学校/ Current School \_\_\_\_\_ 现在年级/Current Grade \_\_\_\_\_

### 父母或监护人/Parent or Guardian information

父/母 Father /Mother \_\_\_\_\_ 监护人/ Guardian(s): \_\_\_\_\_

家电/Home phone: \_\_\_\_\_ 手机/Mobile phone \_\_\_\_\_

电邮 / e-mail \_\_\_\_\_

家庭地址/Mailing address \_\_\_\_\_

### 紧急联系人/ Emergency contact information:

姓名/Name \_\_\_\_\_ 关系/ Relationship : \_\_\_\_\_ 电话/Phone: \_\_\_\_\_

=====

我, \_\_\_\_\_, 在此向中文学校申请 \_\_\_\_\_ (学生姓名) 之入学事项. 我是 \_\_\_\_\_ (学生姓名) 之父/母/合法监护人, 并理解我将完全承担 \_\_\_\_\_ (学生姓名) 在中文学校期间的安全, 健康及其他一切相关责任, 并以签定责任家长的形式尽力协助中文学校完成此责任。

I, \_\_\_\_\_, hereby apply for the admission of \_\_\_\_\_ (student's name) to Chinese Language & Culture Center (CLCC). I am \_\_\_\_\_ (student's name)'s father /mother/ legal guardian, and understand that I am fully responsible for \_\_\_\_\_ (student's name)'s safe, health and all other relevant responsibility when \_\_\_\_\_ (student's name) is in CLCC and I am going to do my best to help CLCC to fulfill this responsibility.

姓名 / Printed Name: \_\_\_\_\_

签名 / Signature \_\_\_\_\_ 日期 / Date \_\_\_\_\_