

德立華中文學校

二零零九學年度註冊單

Chinese School of Delaware

2009-10 School Year Registration Form

P. O. Box 1355, Hockessin, DE 19707

Telephone: (302) 239-0432

Age requirement: four years and up by 8/30/2009

Discount applies if register on or before 7/15/2009

學生姓名 (Student's Name)		性別	生日 (mm/dd/yyyy)	班別	將就讀年級	已在中文學校年數
中文	English	Gender	Birthday	Track A or B*	Grade to enter	Years in CSD
					Advanced Class	
					Adult Class	

家長或監護人 (Parents/Guardians) : \_\_\_\_\_

醫療保險 (Medical Insurance) : 有 (Yes) \_\_\_\_ 無 (No) \_\_\_\_

通訊地址 (Home Address) : \_\_\_\_\_

電話 (Telephone): (\_\_\_\_\_) - \_\_\_\_\_

E-mail address: \_\_\_\_\_

緊急聯絡 (Emergency Contact) : \_\_\_\_\_ 電話 (Telephone): (\_\_\_\_\_) - \_\_\_\_\_

學費：請參照學費一覽表。

Tuition: Please refer to the tuition form.

**Please note: the class max size is 16, students promoted to the next grade level have first priority, after that, first-come-first-serve rule will apply.**

\*Track A is for families who speak Chinese at home; track B is for families who do not speak Chinese at home

Please note that Pre-K and Kindergarten classes start at 1:00 pm for two class periods. The rest of the classes start at 1:30 pm.

**Please make two checks. One check payable to: "Chinese School of Delaware" and the second check payable to: CACC**

Mail registration form and check to: Chinese School of Delaware, P. O. Box 1355, Hockessin, DE 19707

以下請勿填寫 Please do not write below. For official use only.

Tuition: \_\_\_\_\_ Check number: \_\_\_\_\_ Cash \_\_\_\_\_ Date: \_\_\_\_\_

CACC Membership Check number: \_\_\_\_\_ Cash \_\_\_\_\_ Date: \_\_\_\_\_

Porated tuition: \_\_\_\_\_ Check number: \_\_\_\_\_ Date: \_\_\_\_\_

Cash: \_\_\_\_\_