

德立華中文學校

二零一零學年度註冊單

Chinese School of Delaware

2010-11 School Year Registration Form

P. O. Box 1355, Hockessin, DE 19707

Telephone: (302) 239-0432

Age requirement: 3 and a half years old and up by 8/28/2010						
Discount applies if register on or before 7/15/2010						
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
					Adult Cluture 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.

Pleat 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 no refund are given if classes are canceled due to inclement weather or emergencies.

School will try to make up lost days if schedule fits at school's discretion.

Please make two checks. One check payable to: "Chinese School of Delaware"

and the second check payable to: "CACC" for membership

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: _____