

曉市頓華人浸信會中文學校
Chinese Baptist Church Chinese School
報名表 REGISTRATION FORM
For the academic year 20_____ to 20_____

(一) 學生資料 (Information of Student)

中文名 Chinese name: _____ 出生日期 DOB: _____ (mm/dd/yyyy)

英文姓 Last name: _____ 名 First name: _____ 性別 Sex: () M () F

住址 Address: _____

報讀中文學校級別 Grade level of Cantonese class applied for: _____

學生能否聽講中文? Does the student understand Chinese? () 能夠 Yes () 不能 No

(二) 家長/監護人資料 (Information of Parents/Guardians)

父親/監護人 (Father/Guardian)	母親/監護人 (Mother/Guardian)
Name: _____	Name: _____
Phone: _____	Phone: _____
E-mail: _____	E-mail: _____
Religion: _____	Religion: _____

主要聯絡人 Primary Contact:

() 父親 Father () 母親 Mother () 其他 Other _____

溝通方式 Method(s) you accept: () WhatsApp () SMS Text () Phone Call

注：若學生無故缺席，校務處可能會致電或短訊給學生的聯絡人。When a student is absent without notification, school office staff may call or text the contact.

請覆核學生的中英名字，和聯絡人的姓名、電話，與電郵無誤。Make sure the students' names (Chinese and English names) are accurate, and verify the contact' names, phone numbers, and email addresses.

Initial _____ **Date:** _____

(三) 報名程序及注意事項 Procedures of Registration

上課時間是 1:30–3:45 PM，在開學日 1:15 PM 開始接受報名。

We welcome applications on School Opening Day. Class time is from 1:30 to 3:45 PM. Please come 15 minutes early for registration.

年度學費包括秋季和春季課程，支票或現金均可，支票抬頭：CBC。學費恕不退還。若要試課，每堂 \$10。Annual tuition includes Fall and Spring semesters. Check payable to CBC or cash. Non-refundable. Trial lessons cost \$10 each.

請帶同報名表、學費，到中文學校校務處報名，報名時家長需要替子女簽閱醫療免責同意書。Please bring application form and tuition to the Chinese School Office. During the registration, parents should read and sign the “Consent / Medical Release Form” for the children.

曉市頓華人浸信會 Chinese Baptist Church: 900 Brogden Road, Houston, TX 77024

中文學校校務部 Chinese School: Side building of CBC Church, Second Floor

cbchinesesch@gmail.com

(713) 461-0963

<http://www.cbchouston.org/chschoolch.html>

****** Completed by the school office******

Assigned class: _____ Date of enrollment: _____

Payment: \$ _____ ()Cash () Check No. _____

() Signed Consent / Medical Release Form () Presented Calendar, Parents' Regulations

CONSENT / MEDICAL RELEASE FORM

Name _____ Date of Birth _____ (mm/dd/yyyy)

Home Address _____ Grade level in Chi School _____

Allergies or any health conditions: _____

To whom it may concern:

We/I, the undersigned, do hereby give permission for our/my child, _____
to attend and participate in all Chinese School activities sponsored by Chinese Baptist Church during the
school year of **20**_____ **to 20**_____.

We/I authorize an adult, in whose care the minor has been entrusted, to consent to any X-ray
examination, anesthetic, medical, surgical or dental diagnosis or treatment, and hospital care, to be rendered
to the minor under the general or special supervision and on the advice of any physician or dentist on the
medical staff of a hospital, whether such diagnosis or treatment is rendered at the office of said physician or
at said hospital.

The undersigned shall be liable and agree(s) to pay all costs and expenses incurred in connection with
such medical and dental services rendered to the aforementioned child pursuant to this authorization.

Should it be necessary for our/my child to return home due to medical reasons or otherwise, the
undersigned shall assume all transportation costs.

We/I, the undersigned, do also hereby give permission for our/my child to ride in any vehicle
designated by the adult in whose care the minor has been entrusted while attending and participating in
activities sponsored by Chinese Baptist Church.

() (Initial _____) also by registering, we/I consent for our/my family and us/me to be
photographed, audio, and/or videotapes, as the event is documented and to the possible use of those photos,
audio, and/or videotapes by Chinese Baptist Church or CBC Chinese School.

<p>In case of emergency, please contact:</p> <p>Name _____</p> <p>Phone _____</p> <p>Hospital insurance: Yes / No _____</p> <p>Insurance company _____</p> <p>Policy number _____</p>	<p>_____</p> <p>Parent/Guardian Date:</p> <p>_____</p> <p>Parent/Guardian Date:</p>
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