



邁阿密中文學校  
 2009年秋季班報名表  
 Miami Chinese Language School  
 Registration Form for Fall Semester 2009  
 www.miamichineseschool.org

註冊組專用欄
年級: _____

學生姓名: \_\_\_\_\_ (中文) \_\_\_\_\_ (英文)  
 Student Name \_\_\_\_\_ (Chinese) \_\_\_\_\_ (English)  
 出生日期: \_\_\_\_\_ (月/日/年) 性別: \_\_\_\_\_  
 Date of Birth \_\_\_\_\_ (MM/DD/YY) Gender \_\_\_\_\_  
 住 址: \_\_\_\_\_ Apt. \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

家長姓名: \_\_\_\_\_ (父) \_\_\_\_\_ (母)  
 Parent's Name \_\_\_\_\_ (Father) \_\_\_\_\_ (Mother)  
 家長職業: \_\_\_\_\_ 工作電話: \_\_\_\_\_ 電子郵件: \_\_\_\_\_  
 Parents' occupation \_\_\_\_\_ Phone at Work \_\_\_\_\_ E-mail \_\_\_\_\_  
 電話號碼: \_\_\_\_\_ 傳真: \_\_\_\_\_ 手機: \_\_\_\_\_  
 Home Phone Number \_\_\_\_\_ Fax \_\_\_\_\_ Cell phone \_\_\_\_\_  
 緊急聯絡人: \_\_\_\_\_ 電話: \_\_\_\_\_  
 Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

**School Day: Every Saturday From August 29 2009 to December 12 2009**  
**Time: 9:00 AM to 12:00 PM (1<sup>st</sup> 9:00am-9:50am, 2<sup>nd</sup> 10:10am-11:00am, 3<sup>rd</sup> 11:10am-12:00pm)**  
**Cultural classes are incorporated into Language Classes in every other Saturday**  
**11:10am-12:00pm**  
**Fees: \$200 (\$170.00: Tuition & Materials; \$30.00: Registration Fee)**  
**Registration fee are refundable (excluded Adult class) after parents volunteer certain hours**  
**\*\* Discount available for sibling enrollment \*\***  
**\*\*\* Please make check payable to Miami Chinese Language School**

I agree to allow my child's picture(s) to be posted on the Miami Chinese Language School website :  Yes  No (check one)

On consideration for allowing the activities of the Miami Chinese Language School, and for permitting our organization to register with Coral Gables High School at 450 Bird Rd. Coral Gables, FL and indemnify Coral Gables High School and the Miami Chinese Language School in accordance with the following paragraphs:

On Behave of myself, my family, heirs and personal representatives, I hereby release the Coral Gables High School its trustees, officers, employees, agents and Miami Chinese Language School, its trustees, officers, employees, agents from any liability for injuries or death sustained by me or to others as results of my participation in the activities of Miami Chinese Language School.

家長/學生(18 歲以上) 簽名: \_\_\_\_\_ 日期(Date): \_\_\_\_\_

Parent's/Guardian's /student (age 18+) Signature

茲收到繳交邁阿密中文學校學費 US\$ \_\_\_\_\_ Chk# \_\_\_\_\_ Cash \_\_\_\_\_

Miami Chinese Language School, Florida

回 條 Receipt

註冊組專用欄	年級: _____
--------	-----------

茲收到 \_\_\_\_\_ 同學繳交邁阿密中文學校學費 US\$ \_\_\_\_\_.

(Tuition & Fees US\$ \_\_\_\_\_ is paid for student \_\_\_\_\_.)