

東灣中文學校 East Bay Chinese School
New, Siblings EARLY / 新生, 兄弟姐妹 (早) **2020-21**

P.O. Box 5645, Berkeley, CA 94705 Tel: 510 982-1981

學生資料 Student Information: 學生號碼 Student ID: _____ 上學年在校的班級() School Year's Class: _____

姓名 Name: 中文名: _____ English Name: Last: _____ First: _____ Middle: _____

性別 Sex: _____ (女/F=Female, 男/M=Male) 出生日期 DOB: _____ (mm/dd/yyyy Date of Birth)

家中主要語言 Main language at home: _____ (M=普通話/國語, C=廣東話, E=English, O=Other Specified)

學生醫療保險資料 Student Medical Insurance Information: _____

家庭醫生 Family Physician: 姓名 Name: _____ 電話 Phone: _____

地址 Address: _____

醫療保險 Medical Insurance: 公司名 Insurance Company: _____ 保險號碼 ID/No: _____

家庭資料 Student Family Information: (每家只需填寫一份 Needed one per family) 家庭號碼 Family ID: _____

家庭電話 Phone: _____

家庭地址 Address: _____ 城市 City: _____ 郵編 Zip: _____

父親 Father: 中文名: _____ English Name: _____ 職業 Occupation: _____ (Optional)

電話 Phone: _____ Email: _____

母親 Mother: 中文名: _____ English Name: _____ 職業 Occupation: _____ (Optional)

電話 Phone: _____ Email: _____

緊急聯絡人 Emergency Contact: (不包括家長 Other than parents)

(1): 姓名 Name: _____ 電話 Phone: _____

地址 Address: _____

(2): 姓名 Name: _____ 電話 Phone: _____

地址 Address: _____

授權 Authorization:

如發生意外, 在家長(監護人)及緊急聯絡人都無法聯絡到的情況下, 本人准許東灣中文學校負責人全權處理有關學生的事宜. 本人不以東灣中文學校或所租用的學校為責任承擔者. I give my permission to the school personnel to take full charge of any emergency in the event that the student's parents/guardians/emergency contact persons listed above are unable to reach. I will not hold East Bay Chinese School, the Host School, Teachers, or any staff members liable in the case of accidents or injuries. X _____

我已詳細讀過東灣中文學校學生行為守則, 我明白并答應負責監督學生遵守行為守則所有事項. I have carefully read, and understood the East Bay Chinese School Student Behavior Guidelines and promise to supervise my child to fully adhere to it. X _____

我已詳細讀過東灣中文學校家長守則, 我明白并答應遵守行為守則所有事項. I have carefully read, and understood the East Bay Chinese School Parent Guidelines and promise to fully adhere to it. X _____

我已詳細讀過東灣中文學校家長義務服務守則, 我明白并答應遵守行為守則所有事項. I have carefully read, and understood the East Bay Chinese School Parent Volunteer Guidelines and promise to fully adhere to it. X _____

Note1: 課程選擇將以開學時所開之課為準. Actual enrollment will be determined based on Course availability at the start of the new school year.

Note2: 學校將盡量配合您學習的需求但無法保證註冊名額. The school can not guarantee any class availability.

我同意按時接送孩子. 如放學時遲到接孩子, 學校將收取每分鐘\$1的罰金, 放學時間: 語言課12:00 pm以後, 文化課1:00 pm以後. 上學年家長放學後超時帶走學生(\$30/15分鐘). 不參加文化課程的學生必須在12:00之前接聽. 否則將會收到遲到的接機費用. I agree to pay penalty for late after school pick-up (\$30 for first 15 minutes) from, e.g. 12:00 to 12:15 pm or 1:00 to 1:15 pm (Culture class days), and \$1.00 per minute thereafter. Students not enrolled in culture class must be pick up by 12:00 pm otherwise a late pickup fee will be accessed. X _____

請把我的資料加入EBCS通訊錄 I wish to be added to the EBCS Student Directory. X _____

我同意校方使用孩子在參加學校有關活動時拍攝的照片或录像. I give permission to EBCS to use photographs of my child(ren) for EBCS related publications and social media. X _____

父母或監護人簽名(Parent/Guardian signature) _____ 日期(Date): _____

費用/班級 Fees/Class:

新生註冊費, 不能退款. New student registration fee per student, non-refundable.....	25
新生家長服務保證金(每家不論多少學生註冊). Family service deposit per family (refund request expires 1 year from last day of academic school year).	\$ 0
整學年學費, Full school year tuition	\$ 455
書本/教材費, Textbook/Materials Fee (PK=\$0)	\$ 40

總額 Total \$ _____ **25**

學校專用 School Use Only:

Check No: _____	Amount \$: _____	Received By: _____	Date: ____/____/____
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