



# 2008-09 托倫斯中文學校註冊單

## Torrance Chinese School Enrollment Form

新生 New Student  
 舊生 Returning Student

\*\*\*\*本表遺失酌收工本費五元，請勿遺失 \$5 for lost form\*\*\*\*

時間 TIME : May 31 & June 7, 2008 9:00 am - 11:30 am	地點：托倫斯西區高中 PLACE: West Torrance High School 20401 Victor Street, Torrance, CA 90503	年齡：五足歲以上(以12/01/08為準) AGE : Five Years or Older by 12/01/08
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班級 Grade	中文姓名 Chinese Name	英文姓名 English Name	出生年月 Date of Birth	性別 Gender	課外活動 Extracurriculum	家長服務項目 Parent Service	服務日期 Service Date
						上學期 Fall	
K班至三年級, 以及 PCK-PC3班級的學生, 課外活動將由學校统一安排。 其它學生可選修下列課外活動：						下學期 Spring	
籃球 - BK 網球 - TN 田徑 - TF 紙藝 - PF (十歲以上) 口才訓練 - PS 素描 - DR1 書法 - BR 中國民族舞蹈 - CFD 中國傳統舞蹈 - CTD 水彩/油畫 - WC 棋藝社 - CX 中國結 - CS (十歲以上) 花藝研習 - FA 直笛合奏 - RE 數學競賽 - MCC 青少年中文會話 - CY 中年級中文聽、說、讀加強班 - CRM						A. 教室服務 (幼稚 -- 二年級) Room Parent (K--2nd Grade) B. 一般服務 General Service	

父/Father - 中文姓名：\_\_\_\_\_ Name(Last/First) : \_\_\_\_\_ ,

聯絡電話/Tel : (w) \_\_\_\_\_ (c) \_\_\_\_\_ Email : \_\_\_\_\_

職業/Occupation : \_\_\_\_\_ 興趣、專長/Expertise : \_\_\_\_\_

母/Mother - 中文姓名：\_\_\_\_\_ Name(Last/First) : \_\_\_\_\_ ,

聯絡電話/Tel : (w) \_\_\_\_\_ (c) \_\_\_\_\_ Email : \_\_\_\_\_

職業/Occupation : \_\_\_\_\_ 興趣、專長/Expertise : \_\_\_\_\_

家庭地址/Address : \_\_\_\_\_ 城市/City : \_\_\_\_\_ 郵區/Zip : \_\_\_\_\_

家庭電話/Home Phone: \_\_\_\_\_

緊急連絡人/Emergency Contact (1) : \_\_\_\_\_ 電話/Tel : \_\_\_\_\_ 關係/Relationship : \_\_\_\_\_

緊急連絡人/Emergency Contact (2) : \_\_\_\_\_ 電話/Tel : \_\_\_\_\_ 關係/Relationship : \_\_\_\_\_

Full Year 學雜費 (Tuition & Misc. Fee) \$180x2=\$360, 家長服務費 (Service Deposit) \$60x2=\$120	
一般學生	For: First & second child \$180 x 2 = \$360 or
第三名以上學生 / 教師子女	Third & after child / Teacher's child \$340/\$300
家長服務費	Service Deposit (Adult student waived) \$60 x 2 = \$120
減：家長服務憑證	Minus: Service deposit certificate - \$60 x 1 or 2 (verify)
加：遺失註冊單	Plus: Lost registration form \$5
註冊手續費(舊生06/07/08以後註冊)	Service charge (register after 06/07/08) \$20
分期付款手續費	Installment charge \$20
付費教科書 (1-4年級, 所有PC班)	Textbook Fee (1-4, All PC Classes) \$15
	總計 (Total) _____

現款Cash \_\_\_\_\_ 支票Amount \_\_\_\_\_ CK# \_\_\_\_\_ 總計Total \_\_\_\_\_ 收款人Sign \_\_\_\_\_ 日期Date \_\_\_\_\_

### AUTHORIZATION FOR EMERGENCY MEDICAL CARE AND WAIVER OF CLAIMS

I request that above student(s), being in good physical condition, be permitted to participate in school activities which are scheduled between 9:00 a.m. and 12:00 p.m. for non-credit classes. Should he/she become ill or injured during the school hours:

- (1) He/She may (可)  may not (否) receive necessary first aid. (可否接受一般急救)  
 (1) He/She may (可)  may not (否) receive medical attention by a dully licensed physician. (可否接受醫生治療)  
 (1) He/She may (可)  may not (否) be admitted to a hospital in case of emergency. (可否在緊急醫療情況下送往醫院)

This authorization is given pursuant to Section 25.8 of the Civil Code of California and remains effective only for the event and the time period specified above. I will not hold Torrance Chinese School (TCS), its officers or teachers liable for medical aid rendered, and will reimburse TCS for any and all hospital, medical, and other expenses incurred in his/her care. I am hereby waiving all claims against TCS for injury, accident, illness or death occurring during the school hours.

醫療保險 Health Insurance	健康需要 Health Need
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I hereby grant TCS permission to photograph/videotape the above student during school activities for non-commercial purpose. The images either on paper or electronic forms shall only be displayed on TCS publications, such as internal teaching materials, yearbook, and TCS website.

家長簽名 Parent Signature \_\_\_\_\_ 日期 Date \_\_\_\_\_