

## 報名表格 Registration Form

STUDENT INFORMATION							
Student Name:			學	學生姓名:			
	Last Name		First Name				
Gender 性別:		Birthday 出生日期:		Ethnicit	y 種族:		
Home Address	地址:						
	Street A		(	City	State	Zip	
Phone 電話: _		Email 電子	<b>~</b> 信箱:				
Language wan	t to learn 想要	學習的語言: Cantonese	e 廣東班 / Mano	larin 國語班	E		
•		分課程: YES / NO cation received 學歷:					
CONTACT INFORMATION							
Guardian 1 Name 監護人 1 姓名: Phone 電話:							
Email 電子信	箱:						
Guardian 2 Na	me 監護人2	姓名:	Phone '	電話:			
Email 電子信息	箱:						
Would you like	e to volunteer	for any activities or eve	nts at school?	YES / NO			
Τε		field trips cost extra. Sch 卜活動費用另計。上課			•	unds.	
Applicant / Par	ent Signature	學生/家長簽名:			Date 日期:_		

Please email or send completed form to Chinese School of San Diego.
5075 Ruffin Rd., Ste. A,
San Diego, CA 92123
info@chineseschoolsd.org
Make check payable to Chinese School of San Diego.

Please complete questions on the next page.

1.	Have you studied with us before? 你以前曾經在我們學校學習過嗎?	YES / NO
	If yes, how long? 如果有,多久?	
2.	How did you hear about our school? 你是如何得知我們學校?	
	School Website 學校網站/ Social Media 社交媒體(Facebook, Instagram) / Newsp	paper 報紙 /
	Referral 朋友介紹 / Others, please specify 其他,請說明:	
3.	Why did you choose our school? 你為什麼選擇我們學校?	

PLEASE DO NOT WRITE BELOW. FOR OFFICE USE ONLY							
[	] CANTONESE 廣東班		[ ] MANDARIN 國語班				
Classes are divided between Cantonese and Mandarin							
1.	Children	Ages 5-6	Beginning I/II Intermediate I/II				
2.	Youth	Ages 7-11	Beginning I/II Intermediate I/II				
3.	Teens	Ages 12-17	Beginning I/II Intermediate I/II Advanced I/II				
4.	Adults	Ages 18 and over	Conversational Class				
Amount paid: \$ Received by:							