

圣地亚哥华夏中文学校学分部在校生注册表
Current Hua Xia Credit Program Student Registration Form

Website: <http://www.sdhxcs.net>

学生中文姓名 _____ 学生英文姓名 _____
 (Student Chinese Name) (Student English Name)

性别 _____ 出生日期 _____ 年 _____ 月 _____ 日
 (Gender) (Birth Date) (Year) (Month) (Day)

父亲姓名 _____ 母亲姓名 _____
 (Father's Name) (Mother's Name)

家庭电话 () _____ - _____ 手机 () _____ - _____
 (Home Phone) (Cell Phone)

家庭住址 _____
 (Home Address)

电子邮址 _____
 (E-mail address)

Office Use Only
支票总金额: _____ (Total)
支票号码: _____ (Check No.)
经手人签字: _____ (Signature)

高中/初中名称 _____ 年级 _____ 学区名称 _____
 (High/Middle School Name) (Grade Level in Fall 2010) (School District Name)

To receive school email, please go to <http://groups.yahoo.com/groups/huaxiacs>

目前所在班(Current Class) _____ 老师姓名 (Teacher's Name) _____ 上午 (AM) _____ 下午 (PM) _____

在本校的兄弟姐妹姓名/班级 (sibling in our school name/class) _____ / _____

紧急事故联络人姓名 (Emergency Contact Name) _____ 电话 (Phone Number) _____

除家长外紧急事故联络人姓名 _____ 电话 _____
 (Emergency Contact other than parent) (Phone Number)

家庭医生 (Family Physician) _____ 电话 (Phone Number) _____

Authorization for Emergency Medical Care and Claim Waiver

I request that the above applicant be permitted to participate in San Diego HuaXia Chinese School (SDHXCS) during the 2010-2011 school year. I affirm that the applicant is at school she/he may receive necessary first aid, medical attention by a licensed physician or be admitted to a hospital in case of emergency.

I will NOT hold SDHXCS and its officers/teachers/staff liable for medical aid rendered and will reimburse SDHXCS for medical or other expenses incurred in his/her care. I am hereby waiving all claims against SDHXCS & its officers/teachers/staff for injury, accident, and illness or death occurring during all the school activities. The authorization remains effective only during school hours for school year 2010-2011.

Authorization for SDHXCS to report Chinese grades to student's middle / high school

We have read and understood the Credit Program Guideline, course information and class rules. We also understand that the parent's signature on the registration form allows SDHXCS to send my (my child's) grades to my (my child's) home school.

家长签字: (Parent's Signature) _____ 日期 (Date) _____

	学费 (Tuition)	PTA Fee	合计总数 (Total)
第一个子女	\$450	\$10	\$460
第二个子女	\$420	\$0	\$420

Please make a separate check for each child payable to SDHXCS and submit it to his/her language teacher by 5/16/2010 in order to hold a spot in the same class. All the current credit class students will be treated as new incoming students on the basis of first come first served if their forms and checks are received later than 5/16/2010. Thank you.