BERRYESSA CHINESE SCHOOL

語文班學費: \$465 舊生提早註冊優惠價. \$520 (於二零二三年四月二日及之後註冊)



P.O. BOX 32988, San Jose, CA 95152-2988 Voice Mail: (408) 5200-BCS

資料不全, 恕不受理。

Email: registration@bcs-usa.org

www.bcs-usa.org

語文班註冊單

Language Class Registration Form

支票抬頭請寫 "BCS",同時請註明學生英文姓名以及學生 ID 號碼 Incomplete application form will not be processed. 請於二零二二年三月五日以前註冊。(網上付款加收5%手續費) Language Class Tuition: \$465 – Early Bird Return Student Registration | \$520 – Standard (Register on or after 04/02/2023) Please make check payable to "BCS" and write student's English name and ID on the check. (5% processing fee will be applied to online payments) □國語班 Mandarin □中文外語班 Chinese as a Foreign Language (CFL) □粵語班 Cantonese 註冊年級 Intended Grade Level 優先類別 Priority: 如有兄弟姐妹就讀,請填寫其中一個兄弟姐妹的中文或英文姓名,語文班級及學生 ID。如您的家長是 家中母語 老師或校董,請填寫家長的中文或英文姓名。If the student has a sibling already enrolled, please fill out the sibling's name, Primary Language at Home student ID and Language class. If the parent is a teacher or board member, please fill out the parent's name. □ 國語 (Mandarin) ■老師 Teacher □ 粵語 (Cantonese) 學生資料 Student Information □ 英語 (English) □ 其他 (Other)_ □男 □女 F 出生日期 Date of Birth (MM/DD/YYYY) 中文姓名 Chinese Name 英文姓名 English Name 性別 Sex 您是如何得知我們? How did you hear about us? □親戚 Family 地址 Home Address 城市 City 郵區 Zip code □朋友 Friend □網站 Website 電話 Home phone 家長手機 Parent's cell phone 家長電郵 Parent's email □其他 Other **OFFICE USE ONLY** 父親 / 監護人中文姓名 父親 / 監護人英文姓名 母親中文姓名 母親英文姓名 Father's/Guardian's Chinese Name Father's/Guardian's English Name Mother's Chinese Name Mother's English Name CK# 醫生姓名 Physician's Name Staff Init. Date 緊急聯絡人姓名 Emergency Contact (non-family member) 與學生關係 Relationship to student Class Class ID# 草簽 Initial 緊急聯絡 Emergency Contact: I hereby give my consent, in an emergency, for the school to call the child's doctor. If the doctor listed cannot be reached, the school is authorized to take my child to the nearest emergency aid station by ambulance, to be given the necessary care. If my child needs to be sent home and I cannot be reached, the school is authorized to contact the emergency contact provided above. I understand that it is my responsibility to notify the school of any change in the above information. 草簽 Initial 家長義工 Parent Volunteer: ■校區經理 Campus Manager 您是否願意成為博愛義工的一員? Are you willing to become a BCS volunteer? 🔲 願意 Yes 📮教務 Curriculum 🛛 活動 Activity 🖫 公關 PR □不願意 No □註冊 Registration □財務 Finance □資訊 IT 草簽 Initial 家長值日 Room Parent / 校區巡邏 Campus Patrol: 家長值日及校區巡邏是就讀博愛中文學校的一項必須履行的義務,如不履行罰金為廿元,校方可因家長不履行義務而拒收該學生的註冊。 Room Parent/Campus Patrol duties are mandatory at BCS. I agree to comply with this and pay \$20 penalty for failure to perform. Student registration may be denied due to parent's failure of performing these duties. 現任本校老師和校董可免役。BCS Teachers and board members may be exempt from this duty.

草簽 Initial 學校規範 Code of Conduct: 我和我的孩子完全同意遵守校規。 My child and I agree to fully abide by the BCS code of conduct.

家長或監護人簽名 Signature of Parent or Guardian (Print & Sign)

the school activities.

草簽 Initial 退票罰款 Return Check Fee: \$20 退費手續費 Refund Processing Fee: \$40 退費必須在學年開學兩週內辦理。 Request for tuition refund can only be made during the first two weeks of the school year.

日期 Date

請簽名和寫上日期 Please sign & date!