

河滨华夏中文学校新生报名表

Riverside Hua Xia Chinese School

Registration Form

学生中文姓名: _____

This form is not for Credit Class Student

Student Chinese Name:

学生英文姓名: _____

Student English Name:

性别 _____ 出生日期 _____ 年 _____ 月 _____ 日

Gender Birth Date: Year Month Day

父亲姓名: (father's name) _____

母亲姓名: (mother's name) _____

家庭电邮 Email: _____

家庭电话 Home Phone () _____ - _____

手机 (Cell Phone) () _____ - _____

家庭住址 (Address): _____

上课时间 Class Time: 下午班 1:00PM - 4:00PM

上课地点 location: John W. North High School, 1550 3rd St., Riverside, CA92507

学生所在学区 School District: _____ 家长服务 PTA Service Yes ___ No ___ (\$20 buy out)

其他在本校子女的姓名 sibling in school _____ 所在班级 class _____

除家长外紧急事故联络人姓名 _____ 电话 Phone _____

Emergency Contact (other than parents)

家庭医生 Family Physician _____ 电话 phone _____

Authorization for Emergency Medical Care and Claim Waiver

I request that the above applicant be permitted to participate in Riverside HuaXia Chinese School (RHXCS) 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 RHXCS and its officers/teachers/staff liable for medical aid rendered and will reimburse RHXCS for medical or other expenses incurred in his/her care. I am hereby waiving all claims against RHXCS & 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.

Yes _____ No _____

I give RHXCS the full right to use pictures with my kid present taken during school activities and cultural events.

Yes _____ No _____

家长签字 (Parent's Signature): _____ 报名日期: (DATE): _____

Website: <http://www.riversidechinese.org> Email: tina.huaxia@yahoo.com Tel: 909-213-9776

Mail in registration to Riverside Hua Xia Chinese School, P.O. Box 1400, Loma Linda, CA. 92354

学生人数	学费(Tuition)	家长会费(PTA)	家长服务费(Service Fee)	合计总数(Total)	
第一子女 (1 st)	320	10	20	\$350	Make check payable to RHXCS
第二子女 (2 nd)	290 (10% off)	free	20	\$310	多子女家庭有分期付款学费计划