



黎明中文學校註冊表

Lee-Ming Chinese School Registration

Website: www.lee-ming.org

Email: leemingschool@yahoo.com

學生姓名 Student Name Chinese 中文	English 英文	Date of Birth	上學期是否在黎明上課? Did you take a class last semester?		
1)			是 Yes	年級 Class	否 No
2)			是 Yes	年級 Class	否 No
3)			是 Yes	年級 Class	否 No
父親 姓名 Father's Name:		母親 姓名 Mother's Name:			
住址 Address:					
電話 Phone (H):		Cell Phone:		Email (Required):	
Emergency Contact: Name		Phone (H)		Cell Phone Relationship	
課程 Language Class		1 st student \$225	2 nd student + \$205	3 rd student + \$205	TOTAL
傳統班 Traditional Chinese for Chinese Speaking Family, including seminars of Chinese heritage					
雙語班 Traditional Chinese for English Speaking Family, including seminars of Chinese heritage					
總計 TOTAL:					

Make checks payable to: **Lee-Ming Cultural Association**
 Mail to: **P.O. Box 83, Gwynedd Valley, PA 19437**

Refund Policy: No refund after two weeks. Tuition will be prorated for late enrollment based on how many classes remained if registered after school start. 學校上課兩週以後，恕不退還任何費用。開學後註冊的學生，學校將按該生實際所應上課時數，予以計算學費: (full tuition) x (remaining number of weeks /15 weeks). If you have any questions, please email: leemingschool@yahoo.com

- 上課地點 **Language Class Location:** Peace Valley Chinese Christian Church (PVCCC)
565 Virginia Dr., Ft. Washington, PA 19034
- 上課時間 **Language Class Hours:** 2:00-4:00PM, Sunday.

Insurance Waiver
 In consideration of accepting membership in the Lee-Ming Cultural Association as student, parent of student, faculty or staff, I, my family, our heirs, executors, and assigns, do hereby waive and release any and all past, present, and future claims and rights for claims against Lee-Ming Cultural Association, the Lee-Ming Chinese School, its agents, officers, board members or members for any and all injuries or property loss suffered, incurred, or in any way connected or arise by us during school hours, school sponsored activities, and all Lee-Ming Cultural Association related functions.

Insurance Certification
 I hereby certify that our family and guests will provide our own personal accident and health insurance when attending Lee-Ming Cultural Association related functions.

Your signature below indicates you have read and understood all of the above and have also read and understood the Parents' and Students' Guidelines listed on the following page and that you and any/all family members registered, attending, or visiting the Lee-Ming Chinese School and/or any of its programs, functions or events agree to abide by it.

Parent/Guardian/Self _____
 Signature Date