

美華中文學校學生報名表
Mei-Hwa Chinese School Student Registration Form
P.O. Box 10638
Silver Spring, MD 20914-4264

學生英文姓名 _____ 中文姓名 _____
Student's Official Last Name First Name Chinese Name

出生日期 _____ 出生地 _____ 性別 _____
Date of Birth Year/Month/Day Place of Birth Gender

年級(美華) _____
Grade in Mei-Hwa

年級(英文學校) _____ 英文學校名稱 _____
Grade in English School English School Name Code

父親或監護人 _____ 中文姓名 _____ 職業 _____
Father/Guardian Father's English Name Father's Chinese Name Occupation

母親或監護人 _____ 中文姓名 _____ 職業 _____
Mother/Guardian Mother's English Name Mother's Chinese Name Occupation

地址 _____
Home Address
_____ City State Zip

電話號碼 _____ 電子郵址 _____
Phone Number Home Fax Cell Work Fax Cell e-mail:

家庭醫師姓名，電話 Physician's Name and Phone No.

緊急情況聯絡人，電話 Emergency Contact Person Name and Phone No.

- I DO NOT have access to e-mail, please provide hard copy for all the school's correspondence.
 I DO NOT want to be listed in the school directory.

Parent/Guardians' Agreement

I will not hold the Mei-Hwa Chinese School staff or the Board of Directors liable for personal injury or damage while my child attends the school. In the event that child becomes ill or injured, I authorize the school staff to administer first aid and/or take my child to hospital for emergency treatment if necessary. I will pay the medical expense if the above situation occurs.

Signature: _____ Date: _____