



# WINCHESTER SCHOOL OF CHINESE CULTURE

## 文誠中国文化学校

### REGISTRATION FORM

#### Childcare for School Vacation Week 2010 Feb 15-19

#### Part I: Student Information 学生资料

Last Name 姓	First Name 名	Chinese Name 中文名	Sex 性别	Elementary School	Grade in 2009 Fall	ASP member (Y/N)

#### Part II: Session Selection

Attending Days	2/15/2010	2/16/2010	2/17/2010	2/18/2010	2/19/2010	Total Charge
Select Day(s)						
Fee (ASPmember)	\$30	\$30	\$30	\$30	45*	
Fee (Non-ASP)	\$50	\$50	\$50	\$50	65*	

\* Friday extra \$15 for Disney On Ice ticket. \*\*Check payable to WSCC

#### Part III: Student Health Information (please attach a copy of Doctor signed Health Form)

Food Allergy:
Significate Health concern:

#### Part IV: Parent/Guardian Information 家长/监护人资料

Name _____	姓名(Chinese Name)
Relation to Student 关系	
Street Address 街道	
City/State/Zip: 城市/州/邮编	
Home Phone 家庭电话 _____	Mobile: 手机 _____
Email: 电子邮件 _____	
<b>Emergency Contact (Name&amp;Phone)</b>	

#### Part V: Safety, Liability Responsibility Agreement 安全与责任保证书

I agree to take full responsibility for my children to obey WSCC rules during school time. I agree to take full responsibility for the safety of myself and all members of my family while attending WSCC. I will not hold WSCC liable for any personal injury, any personal property damage, accident, illness or any unexpected things, which may occur in the premise during school time. I agree to take full responsibility for any damage caused by me, or by any of my family members to the facilities used by WSCC during school time.

在校期间, 每位家长有责任监管好自己的孩子遵守学校规章制度。如有任何事故发生, 当事人本人, 及学生家长要承担一切后果。如有对学校, 他人造成任何财产损失及人生伤害, 由当事人本人, 及学生家长赔偿全部损失。

家长签字 (Parent/Guardian Signature): \_\_\_\_\_

日期 (Date): \_\_\_\_\_ 月 (Month), \_\_\_\_\_ 日 (Day), \_\_\_\_\_ 年 (Year)

#### Part VI: For WSCC administration use only:

Note: _____ updated 1/25/2010
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