

丹城中文学校 学生注册表

Denver Chinese School Registration Form

DTC Campus _____ Highlands Ranch Campus _____ Lakewood Campus _____

注册学年: Register Year:	是否新生: 是____ 否____ New Student: Yes No	Chinese Class to register: 中文注册课程/班级:	文化课名称 Cultural Class: 1 _____ 2 _____
中文姓名 Chinese Name:	English Name (Last, First)	性别 Sex	生日 Birthday:
家庭住址 Home Address:		城市 City:	州 State: 邮编 Zip:
住宅电话 Home phone:	手机 Cell Phone:	联系用电子邮件地址 Contact E-mail (please print):	
父亲姓名: Father Name	职业: Occupation	工作电话: Work Phone	
母亲姓名: Mother Name	职业: Occupation	工作电话: Work Phone	
是否允许给孩子照相: 是____ 否____ Allow to take photo of your child(ren): Yes No		家长才艺特长 Parent Art or Entertainment talent?	
是否愿意作义工? 是____ 否____. 若是: 照相____, 注册____, 值班____, website____, yearbook____, 写作____, 新年晚会____, 其它:____ 是否愿作老师? 是____ 否____. 若是: 学前班____, 低年级班____, 中年级班____, 高年级班____, 成人班____, 舞蹈____, 音乐____			
退款办法: 第一周前退学, 退款 100% 第二周前退学, 退款 90% 第三周前退学, 退款 80% 第三周以后退学, 无退款.		Refund Policy: If you drop out: First week, 100% refund Second week, 90% refund Third week, 80% refund After the third week, no refund.	
<p>本人同意, 在丹城中文学校期间的任何财产损失、本人及上述学生的身体伤害均由本人负责。本人将不追究丹城中文学校、及其理事、工作人员、教师、和义工的责任。本人同意, 上述学生在校发生意外, 学校有权根据具体情况予以处理或送往医院, 一切费用和责任由本人承担; 本人同意, 如果上述学生在校损坏东西, 一切由本人负责赔偿。</p> <p>I, the undersigned, hereby understand and agree that I will not hold Denver Chinese School, its officials, officers, teachers and volunteers liable for any bodily injury and property damage I and my child/children may sustain by associating with and/or taking part in any of the activities sponsored by Denver Chinese School. I grant Denver Chinese School the authority to send my child to hospitals under emergency medical situations and I will pay all fees and costs. I further agree that I will be fully responsible for any property damages to the school facility caused by my child or myself.</p>			
学校专用 For School Use Only			
中文学费 Chinese Tuition			Note: There is a discount for siblings.
文化课学费 Cultural Class Tuition			
教材 Text Book			
辅助教材 Practice Material			
作业本 Homework Material			
折扣 Discount			
注册费 Registration Fee			
总计 Total			
收费 Fee Paid	现金 Cash	支票号码 Check No.	经受人 School Officials

学生/家长/监护人签名: _____
Student/Parent or Guardian's Signature

日期: _____
Date

Denver Chinese School 2014 - 2015
MEDIA PERMISSION FORM



Dear Parent/Guardian,

During the school year, staff of the Denver Chinese School and media representatives may want to interview, photograph or videotape your child for use in publications, television reports, school district home pages and public presentations. The pictures may be of groups of students or individuals, and the students' names may be used.

Please complete the section below and return the form to the school office.

Thank you for your cooperation in helping us highlight the good work and efforts of our learners and instructors.

Please check one:

- I give permission for my child to be photographed and interviewed and permission to have my child's name used.
- I give permission for my child to be photographed, but **do not** want my child's name used.
- I **do not** want my child photographed or interviewed and **do not** want his or her name used.

Child's Name

Teacher

Parent/Guardian Signature

Today's Date