

ENROLMENT FORM AND LEARNING AGREEMENT

| STUDENT DETAILS 学生资料 | | | | |
|--|----------------------|--|--|--|
| Surname 姓: | First Name 名字: | | | |
| Chinese Name (if any) 中文姓名: | Male/Female男/女: | | | |
| School Name 就读学校: | Date of Birth 生日: | | | |
| Main Language at Home 在家主要语言: | Food Allergies 过敏食物: | | | |
| PARENT DETAILS 家长资料 | | | | |
| Father's Full Name 父亲中英文全名: | Mobile Number 手机号码: | | | |
| Mother's Full Name 母亲中英文全名: | Mobile Number 手机号码: | | | |
| Contact Email 联络电子信箱: | | | | |
| Home Address 家里住址: | | | | |
| Would you like your child to learn Simplified Chinese or Traditional Chinese ? (Please circle) 请问您想让孩子学习简体中文或正体中文? (请圈选) | | | | |
| Name of the person picking up the child/ children if not their parents 如果不是父母接送小孩的话,接送人的姓名 | | | | |
| Relationship to the Child 跟小孩的关系: | Mobile Number手机号码: | | | |

CONSENT FOR EMERGENCY TREATMENT 紧急事故处理同意书

GP Surgery 社区诊所名称:

GP Contact No 社区诊所联络电话::

GP Address 社区诊所住址:

I agree to any emergency treatment necessary for the above child. 我同意有紧急事故发生时,可以对这位小孩做任何必要的紧急处理。

Relationship to the child跟小孩的关系:

Signature 签名:

PHOTO/VIDEO CONSENT (Please Circle) 请圈选同意使用影像的方式

We will be taking photos/videos regularly for classroom and school activities. Please indicate your preference. (No names will be printed) 平常上课或学校有活动时,时常会有拍照或录影,请让我们知道您对影像使用的偏好。(影像使用都不会显示孩子的姓名)

Permission to take photos/videos of your child? 可以帮您的孩子拍照或录影吗? Yes / No 可以/不可以 If yes, how you would like us to use the photos/videos? 如果可以,请问您同意我们如何使用?

| | Website 网站 | Facebook 脸书 | Printed publications 印刷品 | Flyers 宣传单 |
|--|------------|-------------|--------------------------|------------|
|--|------------|-------------|--------------------------|------------|

Signature 签名:

HOW DID YOU HEAR ABOUT US (Please Circle) 请圈选您是如何知道我们这所中文学校的?

| Website网站 | Facebook脸书 | Community Group 社区团体: | Friend 朋友: |
|-----------|------------|-------------------------|------------|
| Flyer 宣传单 | Church 教会 | Existing student 目前的学生: | Other 其他: |

TERMS AND CONDITIONS 合同条款

- 1. Once the term starts, fees are non-refundable. Fees will be refunded only if the student provides a medical certificate for illness which necessitates an absence of more than 3 consecutive weeks from a class.
- 2. Due date for the school fee is no later than after the first two lessons.
- 3. Sibling discount is fixed for 10% off for each sibling. We also offer an extra 10% off annual fee discount.
- 4. The school needs a minimum of 6 students to run a class. If the number falls below 6, parents will be informed in advance that the class will be treated as private tuition. The fees will then be charged at the levels required to match the minimum running cost.
- 5. If a class is closed within 3 weeks of the beginning of term due to insufficient enrolment or reasons beyond our control, a pro-rata refund will be given.
- 6. If, due to circumstances beyond our control, a teacher leaves part way through a course and a suitable replacement is found, the course will continue and refunds will not be given.
- 7. Refunds will be made only on return of your enrolment receipt. Please keep your receipt throughout your course.
- 8. If lessons are cancelled due to adverse weather conditions, no refund or replacement lessons will be given.
- 9. If you wish to transfer from one class to another, you may request to do so, subject to availability and permission from the headmistress and pay for the difference of the course fee and the cost of the textbook required.
- 10. The school will not tolerate any discrimination, bullying or bad behaviour. The school aims to teach, inspire, motivate and care for every child during class. Should you have any complaints, please speak in confidence to the teachers and the headmistress.

By filling out our enrolment form, you agree to the above terms and conditions.

填写这份注册单,代表您同意以上的合同条款。

| DECLARATION 声明 | | | | | | | |
|---|------------|-------|--|--|--|--|--|
| I agree to abide by the regulations of the school and the information I have provided. I have read the terms and conditions and refund policy. I also understand that the school reserves the rights to change tutors, reschedule, cancel or combine classes if necessary. 我同意遵守学校的规定和我所提供的资讯,我已经阅读合同条款和退费规定。我也了解学校必要时,有权利更改教师、重新安排、取消或合并班级 | | | | | | | |
| Name in Print: | Signature: | Date: | | | | | |

The information you provide will be held with Chinese Learning Paradise. At no time will your personal information be passed to organisations for marketing or sales purposes. 您所提供的资讯僅供华园中文学校存挡使用,任何时候都不会外传给其他机构用作任何市场调查或销售用途。

^{*}If you were referred by a friend, an existing student or community group, please kindly provide their name or details here so that we can thank them for their recommendation* 如果是朋友或目前的学生或社区团体介绍您来的,是否可以知道他们的名字,让我们有机会感谢他们。