



长城中文学校 学生登记表

Great Wall Chinese Academy – Student Information Form

学生 Student				
<input type="checkbox"/> New <input type="checkbox"/> Renew <input type="checkbox"/> Change Information				
中文姓名 Chinese Name	英文姓名 English Name (Last, First)	美国学校名称 American School Name	性别 Sex	生日 Birthday:
家庭 Family Information				
家庭住址 Mailing Address (street, city, state, zip):			Ethnic Group:	
联系电话 Contact Phones (<i>required</i>)			<input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian or Pacific Islander <input type="checkbox"/> Black (Non-Hispanic) <input type="checkbox"/> Hispanic <input type="checkbox"/> White (Non-Hispanic) <input type="checkbox"/> Unspecified _____	
Home Phone: _____ Cell Phone: _____			How did you hear our school?	
联系用电子邮件地址 Contact E-mail (<i>required, please print</i>):			<input type="checkbox"/> website <input type="checkbox"/> friends <input type="checkbox"/> other _____	
父亲姓名 Father Name: _____		职业 Occupation: _____		
母亲姓名 Mother Name: _____		职业 Occupation: _____		
			School has my permission to include my children in school website and other media materials. <input type="checkbox"/> No <input type="checkbox"/> Yes	
			Make donation to school <input type="checkbox"/> No <input type="checkbox"/> Yes, Pledge \$ _____ the donation are tax deductible.	
家长须知 Parent Responsibilities				
1. It is the parents responsibility to drop off and pick-up the students on time 2. I also understand that my child may be disciplined if breaches of rules and regulations occur, and I assume responsibility for damage to school property brought about by my child. 3. In a medical emergency, the school has my permission to take my child to the emergency room of the nearest hospital when I cannot be contacted, and the hospital staff has my authorization to provide treatment, which a physician deems necessary for the well being of my child. <input type="checkbox"/> Yes <input type="checkbox"/> No 4. I hereby consent to the use of any photographs/video tape taken of my child by the school or the media for the purpose of advertising or publicizing events, activities, facilities and programs of the school in newspapers, newsletters, website, other publications, television, radio and other communications and advertising media. I also authorize the school to publish student work for the purpose of showcasing and recognizing high achievement and good examples of student learning. <input type="checkbox"/> Yes <input type="checkbox"/> No				
By signing below, we/our family hereby release, waive, discharge, and forever hold harmless to Great Wall Chinese Academy, its staff, promoters, and sponsors, from any loss or damage, and any claim of damages resulting from our participation in Great Wall Chinese Academy's programs on account of any injury to my person, or property, whether caused by negligence or otherwise.				
家长签名 Parents Signature: _____ 日期 Date: _____ / _____ / _____				

We welcome students from all culture backgrounds.

Great Wall Chinese Academy Confidential @2010

Web: <http://greatwallchineseacademy.org> **Email:** info@greatwallchineseacademy.org