



# Seattle Chinese School - CSL Class

## 西雅圖華文學校 - 華語第二語言班

### 2010-2011 Registration Form 註冊單

Family ID: AA000-0000

<b>Official Use Only</b>	Date Received	RegisterID
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#### 父母/監護人資料 Parent/Guardian Information

Student's Last Name: \_\_\_\_\_

Father: (English Name) \_\_\_\_\_ / (中文姓名) \_\_\_\_\_

Mother: (English Name) \_\_\_\_\_ / (中文姓名) \_\_\_\_\_

Address: \_\_\_\_\_ WA  
Street City State Zip Code

Home Phone: \_\_\_\_\_

Cellphone 1: \_\_\_\_\_ Workphone 1: \_\_\_\_\_ Email 1: \_\_\_\_\_

Cellphone 2: \_\_\_\_\_ Workphone 2: \_\_\_\_\_ Email 2: \_\_\_\_\_

學生姓名 Student's Name			性別 Sex	生日 Birthday mm/dd/yyyy	舊生原讀班級 Current class at our school	新學年是否註冊 Register for 10-11
姓 Last	名 First	中文姓名				
						<input type="checkbox"/> Yes <input type="checkbox"/> No
						<input type="checkbox"/> Yes <input type="checkbox"/> No
						<input type="checkbox"/> Yes <input type="checkbox"/> No

請根據貴家庭報名學生人數，圈選下列總額：Circle one below

總額 Total: 1 Student \$550 / 2 Students \$980 / 3 Students \$1,410

Amount Received	Check#:	Please make check payable to: Seattle Chinese School
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#### 總額明細：Details of Amount

學費 Tuition \$440 1st child / \$430 Sibling

其他費用 Other Fees: 報名費 Registration \$20 家長會費 PTA \$10 服務保證金 Service Deposit \$80

I agree to indemnify and hold unaccountable the Seattle Chinese School, school board, director, officers, teachers, and agents from any liability, claims, or action arising out of participation in school activities or any other actions. In the event that parents or the designated physician cannot be reached, I authorize the school to use its discretion to secure medical aid. Also I agree to notify the school of any changes of information on this form immediately.

家長/監護人簽名 Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please sign your name here if you DO NOT wish to have your mailing address listed on the school directory.

如果本人不願 將地址登錄於本校通訊錄上，請在此簽名 \_\_\_\_\_



*Seattle Chinese School* 西雅圖華文學校

**2010-2011 Emergency Contact Information**

緊急事故時聯絡資料  
(每年均須重新填寫一份，註冊時一併繳回)

RegisterID:

Family ID: AA000-0000

父母/監護人資料 Parent/Guardian Information

姓 Last name \_\_\_\_\_ Home Phone \_\_\_\_\_  
父親 Father \_\_\_\_\_ cellphone1: \_\_\_\_\_ workphone1: \_\_\_\_\_  
母親 Mother \_\_\_\_\_ cellphone2: \_\_\_\_\_ workphone2: \_\_\_\_\_

In order to provide a safe and healthy environment for your child, this information will be accessible to the following people: Principal, nurse, your child's teachers, and authorized volunteers.

(Use back of this page if you need more space)

Student's Name \_\_\_\_\_ Birth date: \_\_\_\_\_ Sex: \_\_\_\_\_  
Last First Chinese name  
Emergency Contact: \_\_\_\_\_ Phone#: \_\_\_\_\_ Eye Glasses:  Contact Lens:   
Physician: \_\_\_\_\_ Phone#: \_\_\_\_\_ Hospital Preference: \_\_\_\_\_  
Allergies: \_\_\_\_\_ Regular Medications \_\_\_\_\_  
Chronic Illness/Disabilities: \_\_\_\_\_  
Recent Injuries/Surgeries: \_\_\_\_\_

**PARENT/GUARDIAN, PLEASE READ AND SIGN BELOW:** As a parent or legal guardian, I authorize a licensed physician to examine the above named student and in the event of injury to render such emergency care as he/she deems necessary for the treatment of such injury, including consultation and treatment by a specialist, including a surgeon. I understand that every reasonable effort will be made to contact the above named student to the hospital or doctor most accessible.

Date \_\_\_\_\_ Parent/Guardian Signature \_\_\_\_\_

Seattle Chinese School 西雅圖華文學校

2010-2011 Parent Volunteer Service Form

RegisterID:

家長志願工作登記表

Family ID: AA000-0000

父母/監護人資料 Parent/Guardian Information

Student's Last name: _____	Home Phone _____	Email 1: _____
父親 Father : _____	cellphone1: _____	workphone1: _____
母親 Mother: _____	cellphone2: _____	workphone2: _____

家長服務具體方案,請參照學校行政規章的“家長服務辦法”規定辦理。

For a complete detail about the service program, please refer to “Parent Service Rule” in this year’s School Administration Regulation.

家長需義務值勤 8 小時。

每個家庭均會被安排一次“服務項目 A - 學校秩序、安全和交通管理與維持”(8:45 am –12:15 pm), 此項服務算 4 小時服務時數。其他4小時服務項目時, 請由以下選 2 項以上的工作(按1, 2, 3, ...) 以便編排。謝謝!

Each family will inevitably be assigned once to Service Job A to help for school safety, security, and traffic control (8:45 am –12:15 pm), which counts for the first 4 service hours. The next 4 service hours will then be chosen by each family from any of the following jobs. Please choose and prioritize by numbers at least 2 items from the following job opportunities.

服務項目 (Volunteer Job Description) 請選 2項以上Choose at least 2 jobs

- A. 想再多一次學校秩序、安全和交通管理與維持 (4小時服務時數) Safety, Security, and Traffic Control (4 service hours). Mark this only if you wish to fill the full 8 service hours with this job.  
不方便服務之日期 Unavailable to volunteer date \_\_\_\_\_
- B. 擔任班級聯絡人(算4小時服務時數。開學後, 請於“家長與老師座談會”時, 主動表達意願) Room Parent (4 service hours). Be appointed at the first teacher/parent conference in the beginning of school.
- C. 圖書館、辦公室輪值3小時服務時數 Library and Office Duty (3 service hours).  
不方便服務之日期 Unavailable to volunteer date \_\_\_\_\_
- D. 協助擔任說話比賽評審(建議母語為國語的家長選擇此項。每評審一班, 算2小時服務時) Judges for the Speech Contest (2 service hours). Mandarin-speaking parents are preferred.
- E. 協助學校各項行政活動 Help school administration staffs and activities.
- F. 協助家長會秋季聯誼活動 (十月)Help the PTA-Sponsored Family Fun Night (October).
- G. 協助新年團遊會活動(一月二月) 場地佈置、美工、創意、文宣或舞龍舞獅等事項 Help the Chinese New Year Celebration (January or February).
- H. 已知是學校行政人員、家長會幹部或學校老師(為了財務組作業方便仍須先繳服務保證金80元) SCS Teachers, Administration Staffs, or PTA Staffs
- I. 不能服務, 願意捐出所繳之服務保證金80元。未填寫此表的家庭, 視同選擇此項  
Can't volunteer. In this case or for those who do not turn in their job requests, the service deposit of \$80 will be forfeited at the end of the school year.