

B1. 家長 / 監護人 Parents/Guardians

	Chinese Name	English Name	Cell Phone	Home Phone	E-mail Address*
父親/Father					
母親/Mother					
住址/Address					

*至少提供一個電子郵件網址以便接收學校雙週通訊、成人活動、學生家庭作業、等等資料(Minimum one email address is required for receiving school bi-weekly (optional) Parents/Guardians' occupation for Fund-Raising purpose:

B2. 家長/監護人建議 Suggestions/Comments from Parents/Guardians

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C. 家庭醫生、緊急聯絡人 / Family Physician & Emergency Contact Name

家庭醫生/Family Physician				緊急聯絡人/Emergency Contact Name			
姓名/Name		電話/Phone		姓名/Name		電話/Phone	

D. To complete the registration, All Students and guardians must READ and SIGN the followings. For minors (age 18 or under), their legal parent/guardian must sign for them.

RELEASE OF LIABILITY STATEMENTS

In consideration of the activities at the John Adams Middle School, 1081 New Dover Rd., Edison, NJ, sponsored by Edison Chinese School, a nonprofit organization, it is hereby understood and agreed that said Edison Chinese School or its officers individually, will not be held liable for any injury or accident sustained or faculty the loss of or to property belonging to a member of school.

I, _____, ___ agree / ___ disagree my family being photographed and the Edison Chinese School's use of any photos of my family. I understand that if I do not give my consent, my family must avoid being photographed.

	英文正楷/Print Your Name	英文簽名/Signature	日期/Date
監護人/Guardian Name			
監護人/Guardian Name			

註冊組用/Official Use Only (經辦人簽名)

義工服務	報名表資料檢核	語文課登記	文化課登記	學費核算	繳費/支票號碼	日期