中美文化協會愛迪生中文學校 2024-2025 註冊單

CACA Edison Chinese School 2024 - 2025 Registration Form

家庭代號/Family No.:

日 期/Date:

Edison Chinese School is an all-volunteer operation. Each family is required to provide certain amount of time on school day service each semester (initial ______). Or, if you prefer, you may give \$100 donation to relieve this obligation **.

A. 學生資料/Student Information

姓名 (Name)		性別			文課 (Laguage Class)		文化課1 (Cultural Class)		文化課2 (Cultural Class)		合計	
中文 Chinese	英文 English	Sex	山土口州 Birth Date	年級 Grade	學費 Tuition	教材費* Material Fee*	課名Clas	s Name	教材費* Material Fee*	課名Class Name	教材費* Material Fee*	Subtotal
					\$735 (1 st member)	35						
					\$705 (2 nd member)	35						
					\$675 (3 rd member)	35						
	\$695 for the EARLY registration paid by 6/8/24. (\$660 tuition + \$35 administration fee, one culture class is included)				bond 押金 ond Deposi	-			總計: Grand total:			
\$735 for the REGULAR registration paid after 6/8/24. (\$700 tuition + \$35 administration fee, one culture class is included)					nd will be returned to you after fullfiling your workbond uring the school board-election meeting in May /June			** the duty and service list wil be provided for parents to sign up after the new school year starts.				
TOTAL AMOUNT: Please make a check payable to CACA Edison Chinese School, and mail it with this form to: CACA Edison Chinese School, P.O.Box 831, Edison, NJ 08818						Initial:_						

*For the enrollment of culture class only: \$320 tuition + \$35 administration fee + the material fee.

*CSL Adult: \$700 tuition + \$35 administration fee + \$35 material fee.

*Refund policy - School week 3 to week 6: refund 75%. School week 7 to week 12: refund 50%. School week 13 to week 18: refund 25%.

B.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 (optional) Parents/Guardians' occupation for Fund-Raising purpose:

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 or faculty individually, will not be held liable for any injury or accident sustained 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

	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)									
報名表資料檢核 語文課登記 文化課登記 學費核算 繳費(支票號碼及金額) E									