

# CCGC Chinese School 2017-2018 Fall Registration Form

**A. Student** (Returning students only: please enter the grade last semester at Chinese school. )

1. Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Chinese Name \_\_\_\_\_  
 Gender: M / F DOB: \_\_\_\_\_ (mm/dd/yy) New Student  / Grade Last Semester \_\_\_\_\_
2. Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Chinese Name \_\_\_\_\_  
 Gender: M / F DOB: \_\_\_\_\_ (mm/dd/yy) New Student  / Grade Last Semester \_\_\_\_\_
3. Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Chinese Name \_\_\_\_\_  
 Gender: M / F DOB: \_\_\_\_\_ (mm/dd/yy) New Student  / Grade Last Semester \_\_\_\_\_

**B. Contact and Insurance information** (Mark "Same" if the information has not changed.)

Father's Name: \_\_\_\_\_ (include Chinese name if applicable)

Mother's Name: \_\_\_\_\_ (include Chinese name if applicable)

Home Phone Number: (\_\_\_\_) \_\_\_\_\_ Cell Number (\_\_\_\_) \_\_\_\_\_

Email Address: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

**Emergency Contact**

1. Name \_\_\_\_\_ Contact Number : (\_\_\_\_) \_\_\_\_\_

2. Name \_\_\_\_\_ Contact Number : (\_\_\_\_) \_\_\_\_\_

Insurance Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Hospital : \_\_\_\_\_

Student 1 Insurance ID: \_\_\_\_\_ Known Allergy: \_\_\_\_\_ Physician: \_\_\_\_\_

Student 2 Insurance ID: \_\_\_\_\_ Known Allergy: \_\_\_\_\_ Physician: \_\_\_\_\_

Student 3 Insurance ID: \_\_\_\_\_ Known Allergy: \_\_\_\_\_ Physician: \_\_\_\_\_

**C. Fee**

	Tuition <sup>1</sup> \$200	Deposit <sup>2</sup> \$100 ( or \$80)	PTA <sup>3</sup> \$10	Chinese Painting (Beginner) \$50 (Age > 7)	Chinese Painting (Intermediate) \$50 (Age > 9)	Ping-pong \$50 (Age>7)	Basketball \$50 (Age > 8)	Subtotal
1	200		10					
2	200		10					
3	200		10					
<b>Total</b>								

<sup>1</sup> For late registration after 6/10/2017, an additional fee of \$50.00 will be charged. The late processing fee does not apply to new students.)

<sup>2</sup> If you properly fulfill your parents-on-duty (arrive on time and leave on time), school will transfer the \$100 parents-on-duty deposit to next semester. If you did not show up for parent duty, the school will keep the \$100 parents-on-duty deposit. If you choose not to participate in the official parents-on-duty at school, there will be an \$80 parents-duty fee so that school can hire people to fulfill the duty.

<sup>3</sup> PTA charges \$10 per student per semester.

**Please make checks Payable to: CCGC-Chinese School.**

**CCGC Chinese School, 2460 Buena Vista Avenue, Walnut Creek, CA 94597**

**For registration official use only**

Payment Total Amount: \_\_\_\_\_ by Check \_\_\_\_\_ Cash \_\_\_\_\_

Check Number: \_\_\_\_\_ Date: \_\_\_\_\_