# Madison Fine Arts Chinese School Class Registration Form

# 童心艺术中文学校

# Fall 2015 (September 13th - December 13th)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Child’s Name | | Parents’ Names | | | Cell Phone | | |
| (English Name) | (中文姓名) | Father | | |  | | |
| Gender | Birth Date | Mother | | |  | | |
| Home Address  Home Phone | | | Courses | | | | |
| 中文Chinese   * K * I * II * III * IV * V * VI * VII * AP * Special | 美术  Fine Arts   * I * II | | 象棋  Chess | 奥数  Math |
| E-mail  E-mail | | | 音乐  Music | | 科技  Science | 舞蹈  Dance |
| Child’s special interests/requirements | | | | | | | |
| Parents' special requirements | | | | | | | |
| We may occasionally post your child’s pictures on our website or other publicity materials. If you don’t like your child’s pictures to be seen, please check the mark below | | | | | | | |

\* My child has my permission to participate in all indoor/outdoor activities organized by the Madison Fine Arts Chinese School. I agree Sto bring my child to school for classes and to pick him/her up immediately at the end of school. If I fail to pick up my child on time at the end of classes, I agree to pay possible late charges. I will not hold the Madison Fine Arts Chinese School, its host facility, or any of its regular staff and volunteer workers liable for injury, accidents, illness or other unexpected occurrences during school hours and school-organized activities. In case of medical emergency, the school personnel on duty have my permission to seek emergency treatment for my child until I can be contacted. I have read and understood the foregoing statements. I agree to assume the responsibility stated above and waive all claims as indicated.

**Parents’ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_**