南威中文學校 Chinese School of Southern Westchester
2026-27 註冊單 Registration Form

學生資料 Student Information

	1	2	3
姓名（中文）			
Name (English)			
出生日期 Date of Birth			
性別 Gender			
中文報讀年級 Grade for Chinese Language Class			
文化課選修 Culture Course (請按意願選擇，最多 3課 Select 3 maximum, in order of preference) 語文學費包含文化課選修。 成人文化課程$300/年 Annual tuition includes 1 culture course. Adult enrollment in culture course (only) $300/yr. * 須另外繳用品費 Additional fees for supplies may apply	___麻將 Mahjong ___功夫/太極 Kung Fu/Taichi ___棋藝 Chess ___舞蹈 Dance ___嘻哈舞 Hip-hop Dance ___扯鈴 Yo-yo ___乒乓 Table Tennis ___會話 Conversation ___ *國畫Brush Painting ___ *手工藝 Arts & Crafts	___麻將 Mahjong ___功夫/太極 Kung Fu/Taichi ___棋藝 Chess ___舞蹈 Dance ___嘻哈舞 Hip-hop Dance ___扯鈴 Yo-yo ___乒乓 Table Tennis ___會話 Conversation ___ *國畫Brush Painting ___ *手工藝 Arts & Crafts	___麻將 Mahjong ___功夫/太極 Kung Fu/Taichi ___棋藝 Chess ___舞蹈 Dance ___嘻哈舞 Hip-hop Dance ___扯鈴 Yo-yo ___乒乓 Table Tennis ___會話 Conversation ___ *國畫Brush Painting ___ *手工藝 Arts & Crafts
全年學費 Annual Tuition	$___________	$___________	$__ ___ ___ ___
課材費Language Class Material Fee	____$25 / ____$75 (8th Gr+)	____$25 /____$75 (8th Gr+)	____$25 / ____$75 (8th Gr+)
新生手續費(如適用) New Student Fee (if applicable)	____$25	____$25	____$25
家長會費 Parent Association	____$25	____$25	____$25
小計 Subtotal	$___________	$___________	$__ ___ ___ ___
總計 Total Payment Due	$__ ___ ___ ___		

家庭資料 Family Information

	家長 Parent (1)	家長 Parent (2)
姓名（中文）		
Name (English)		
電郵 Email		
手機 Cell		
雇主 Employer		
職業 Occupation		
住址 Home Address		
聯絡人 Emergency Contact	姓名 Name	手機 Cell
醫生資料Physician Contact	姓名 Name	電話 Tel

南威中文學校 ChineseSchool of Southern Westchester

家長同意書 Parent Consent

在此我同意我的兒子/ 女兒_____參加南威中文學校課程。我同
意 南威中文學校可以將我子/女之照片及影片作公開展覽及發佈。我同意南威中文學校和 Edgemont 中學，不需負任何意外傷害的責任。假如任何緊 急狀況發生，但我無法及時趕 到學校，在此我同意學校做適當的緊急處理。 同時我也了解學費於開學兩個星期後是不 可以退費的。

I hereby give my permission for my son / daughter _____ to attend classes at the Chinese School of Southern Westchester. I hereby grant CSSW the right to take, reproduce, use, exhibit, display, publish, broadcast, distribute and create photographs and/or photographic, film or videotaped images of my child. I agree to hold harmless from any liability CSSW/Edgemont High School. In the event I cannot be reached and an emergency occurs, I hereby give permission to school to secure proper treatment. I also understand that after the two weeks from the start of the school year the tuition is non-refundable.

家長或監護人簽名 SignatureofParentor Legal Guardian	日期 Date

P.S. 若支票退票須繳付二十元罰款($20.00 will be charged for a bounced check)

*** ********** ****** ***** **** ****** ******** ***** ***** ***** ****** **** ***** ****** ***

以下由本校填寫(Tobe filled by the school oU̇ice)

收款(Total): $ _____
收款日期(Date): _____
編入年級(Registered Grade):____