註冊表格

AD

ULT CANTONESE egistration Form	P P P P P P P P P P P P P P P P P P P	
MESTER	馬馬	
FALL SEMESTER	THE CHAPTER	
SPRING SEMESTER		1

紐澤西州華人協誼 會華協中文學校

Chinese Language School

Good Shepherd Lutheran Church 233 S. Highwood Ave., Glen Rock, NJ 07452 www.cccnj888.org info@cccni888.org

SPRING SEMES	IER /	<u>mro(t</u>	<u>z,ccciijooo</u>	<u>.015</u>
Full Name:				
Email Address:				
Date of Birth:				
Gender:				
Address:				
Phone Number:				
New Families: How did you	ı hear about us?			
Current Proficiency Level: Beginner		FALL 2025 & SPRING 2026 DATES:		
 Intermediate 		9/20, 9/27,	1/24, 1	/31
Advanced Posson for Loarni	ng the Language:	10/4, 10/18, 10/25,	2/7, 2/	28
 Reason for Learning the Language: Personal Interest Travel Professional Development 		11/1, 11/15, 11/22,	3/7, 3/1	14, 3/28
		12/6, 12/13, 12/20	4/4, 4/1	18, 4/25
		1/10/ <u>25</u> , 1/17/ <u>25</u>	5/2, 5/9	5/2, 5/9, 5/16, 5/30
○ Other (Pleas	e specify):	CLASSES RUN 9:	2 NOON.	
		(15 MIN BREAK AT 10:30AM)		
Registration can be in person or		Fall Semester Tuition \$3		\$325
forms may be emailed to info@cccnj888.org		Spring Semester Tuition		\$325
■温味的場合				
Participation of the Community of the Co	(DO NOT PAY IF YOU PAID FOR KIDS CANTONESE CLASSES AS WELL) Annual Registration Fee Per Student (\$10 per student) WAIVED IF PAYING FOR THE FULL YEAR			
Żelle	總數 Total (Non-Refundable)			
Payments@cccnj888.org	(請在支票抬頭填上 CCCNJ) 支票號碼			
(Please make check payable to CCCNJ) Check #				

本人同意於學年中引起之法律問題,放棄一切對華協中文學校之賠償權利。身為學童之家長/監護人,本人將全權負責學生於援課時間內引 起之意外受 傷或身體不適,本人同意絕對不會對其導師或行政人員 (包括CCCNJ888 INC, Chinese Community Center of New Jersey, Chinese Language School and Good Shepherd Lutheran Church 在内) 之法律責任提出控訴。The undersigned agrees to waive any claims against CCCNJ888 INC, Chinese Community Center of New Jersey, Chinese Language School at the Good Shepherd Lutheran Church at 233 S. Highwood Ave. in Glen Rock, during any school session. I, as a parent or guardian of my child(ren) attending the Chinese Language School, will take responsibility of any accidental injury or health care during school hours inside and out of the Good Shepherd Lutheran Church. I fully understand that I shall not file any claims against the CCCNJ888 INC, Chinese Community Center of New Jersey, Chinese Language School at the Good Shepherd Lutheran Church or any administrative personnel for any accidental injury.

家長 / 監護人簽署:	日期:
Signature:	Date: