



Heritage class Registration Form

传承学堂报名表

Student Info 学生信息

Name 姓名 _____

Age 年龄 _____

Address 家庭住址 _____

Emergency contact 紧急联系人及电话 _____

微信号码/ Cell 手机 _____ Email 电子邮件 _____

Parent Info 家长信息

Name 家长姓名 1 _____

Name 家长姓名 2 _____

您知道学校要求所有注册学生的家长签到老师助教或家长值日吗? YES

报名费: \$30/人 (2017年6月5日之前报名免报名费) \$ _____

中文 <i>9:30-11:15AM</i>	学费: <input type="checkbox"/> \$360/学年 <input type="checkbox"/> \$200/学期			\$ _____
	<input type="checkbox"/> 幼儿园(4岁)	<input type="checkbox"/> 学前班(5岁)	<input type="checkbox"/> 一年级(6岁)	
	<input type="checkbox"/> 二年级	<input type="checkbox"/> 三年级	<input type="checkbox"/> 四年级	
	<input type="checkbox"/> 五年级	<input type="checkbox"/> 六年级	<input type="checkbox"/> 七年级	
	<input type="checkbox"/> 八年级	<input type="checkbox"/> 九年级	<input type="checkbox"/> 高级班 (AP)	
数学 <i>11:25-12:15PM</i> (除注明外)	学费: <input type="checkbox"/> \$200/学年 <input type="checkbox"/> \$120/学期			\$ _____
	<input type="checkbox"/> 小学一年级	<input type="checkbox"/> 小学二年级	<input type="checkbox"/> 小学三年级	
	<input type="checkbox"/> 小学四年级	<input type="checkbox"/> 小学五年级	<input type="checkbox"/> 六年级	
	<input type="checkbox"/> 七年级	<input type="checkbox"/> 八年级		
	SAT Math	<input type="checkbox"/> \$300 (学年)	<input type="checkbox"/> \$170 (学期)	
文化 <i>12:30- 1:20PM</i> (除注明外)	学费(包括杂费): <input type="checkbox"/> \$240/学年 <input type="checkbox"/> \$140/学期			\$ _____
	<input type="checkbox"/> 手工 11:25-12:15PM	<input type="checkbox"/> 儿童画(基础绘画) 11:25-12:15PM		
	<input type="checkbox"/> 舞蹈	<input type="checkbox"/> 书法		
	<input type="checkbox"/> 国际象棋俱乐部	<input type="checkbox"/> 中国画		

TTL: _____

For Bookstore (图书/课本):

Chinese 中文 _____

Math 数学 _____

Others 其它 _____



Minnesota International Chinese School (MICS) · 明州國際中文學校

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Email: info@mnchinese.org Website: www.mnchinese.org

Release of Liability 免责声明

Food Allergy- All food provided by third party in school or fieldtrip/event may be homemade and contain milk, eggs, soy, nuts or other known allergens. MICS **CANNOT** guarantee that any particular food product is free of all traces of any particular allergen, which consumption of a food product will not result in some forms of allergic reaction. The undersigned acknowledges and agrees that 1) the student/parent/third party is aware of such risks and that the student/ parent/ third party will be exposed to food that may result in exposure to allergens, in that regards and assuming such risks, 2) the undersigned hereby fully releases the discharges MICS from any and all liability and /or responsibility to the student/ the undersigned or any third party for exposure to food allergens. 所有在明州国际中文学校上课期间由第三方提供的食品均有可能是家庭制作食物，并含有牛奶，鸡蛋，豆脂，坚果及其他可能的致敏原。任何购买及食用这些食品而导致的食用者过敏风险，均由购买者本人承担，明州国际中文学校不承担相关的任何责任。

I acknowledge receipt of this statement and confirm that I have read and understood all the terms before signing. 我确定收到上述声明并接受所有条款。

Injury Waiver- I hereby confirm that student listed hereby is in good health and capable of participation in all activities and programs. In an emergency, I authorize Minnesota International Chinese School (MICS) to take temporary measures as MICS deems appropriate. MICS is released from any liabilities such as personal injury, illness or property damage, in school or during any fieldtrip. 报名学生身体健康，可以正常上课及参加学校各项活动。在紧急情况下，我授权学校采取紧急措施。如有受伤，生病或财产损失等意外情况，无论在校或校外活动，明州国际中文学校不承担相关的任何责任。

Release Authorization 授权使用

* I hereby give permission to MICS to take photographs and /or videos of students listed hereby that will become permanent property of MICS. I consent to the use of promotional purposes and programming materials including MICS website. 学校有权使用该学生的图片或影像。

Commitment to School/Community Service 承诺义工

As we learned that students who participate in community service learning tend to do better in school, we believe parents participating school service will help allover performance of our students and school's development. Therefore, we ask every parent to sign up for school or community service. By signing this form, you commit to serve as a volunteer at least once per semester. 每个学期至少1次的志愿者服务, 更多更好地参与学校管理与建设。

Signature 家长签字 _____

Date _____