## 卡加利华侨中文学校(中学部)

## Calgary Chinese Private School (Kindergarten & Elementary School Section) 2025-2026 年度注册表格 Registration Form

中文姓名	英文姓名		
Chinese Name:	_	e: (First)	_(Middle)(Last)
注册日期	注册班级		
Date Registered:	Grade Regist	ered:	
中文学校现读班级	英文学校现	]读班级	
Grade at Chinese School:	Grade at Eng	lish School:	
是否新生□,从何校转来_			
普通话简体字			
星期日 Sunday	上午班 Morning Session	9:00 a.m. – 12:00 no	on
出生日期	性别	亚省教育厅编号	
Date of Birth(MM/DD/YY	Gender: /	AB Education Student ID#:	
业有医疗亏码 Alberta Health Cal	re Number:		
地址 Address:			Postal Code :
Citizenship Status:			
☐ Citizen ☐ Perm	anent Resident Student	Visa Expiry Date:(必须填写)	
第一位联络人姓名	关系	电话	电邮
First Contact Person:	Relationship:	Phone No.:I	Email:
第二位联络人姓名	关系	电话	电邮
Second Contact Person:	Relationship:	Phone No.:l	Email:
Waiver Release (豁免声明)			
本人明白我的孩子在卡加利华	侨中文学校学习期间,每方都会竭	尽全力,提供一个安全的学习环境。	在这个前提下, 如果我的孩子
在学习期间受到伤害,我同意	不会要求学校及其校董会,包括其;	校董会成员,员工和义工负任何责任	和提出赔偿。
		ograms and activities of the Calgary Chine	
		hile every care is given to ensure a safe en arm, however arising, sustained by my chi	
and the society, any of its start and	1 volunteers, hable in case of injury of it	arm, nowever arising, sustained by my cm	iu.
Davant/Cuardian Signature 5	之人/此孙工然罢。	Date 日期:	
校方专用 For Office Use	Only		
Cheque / Cash Gr7, Gr8, G	fr10, Gr11 (七、八、十、十一年级) 全年学费: \$400	Grade9, Grade12 (九年级及十二年级 全年学费: \$400	.) Remarks
Cheque No. With Bank Name			Graduation fee: (Grade 9 & 12) Extra \$40
Receipt No.			Early bird: Less \$20
-			(Before June 30, 2022.)
Date Received			
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- ※ 学生于开学前拟申请退学者,须于9月1日或之前用书面通知本校办理。本校将扣除手续费\$80,余款退还申请人。若在开课日后申请退学,学费一概不予退还或转让。Written withdrawal should be submitted on or before September 1, 2024. Tuition fee will be returned with a deduction of \$80 administration fee. No refund and no transfer for withdrawal made after September 1, 2024.
- ※ 所有学生都需要填写注册表,并连同学费一起提交。(支票日期为注册当日日期)
  All students need to complete the Registration Forms and submit along with the tuition fees.

Please fill in the student's name and grade in the message box.



(MM/DD/YY)

126 - 2<sup>nd</sup> Avenue, SW Calgary, Alberta T2P 0B9 Tel: 403-264-2233 Email: ccps@shaw.ca

Website: ccpschool.ca

Parent/Guardian

## Acknowledgement of Risk, Consent of Parent or Guardian, Release of Liability/Responsibility

	ST	STUDENT LEAGAL NAME			
		GRADE:	AM/PM (please circle)		
The	School will make every reasonable effort to ascertain that:				
	The supervisors and staff of the Service Provider are experienced.	•			
	The students who undertake the program or activities will be adec				
	The classrooms and/or facilities where the activity will take place	• • •			
	Any equipment made available by the Service provider or used in	the activity is deemed to be appropria	ite, sate and well maintained.		
Cor	nsent and Acknowledgement of Risk				
1.	I am satisfied that I have been informed of my right to obtain as much ir information beyond that information provided to me by the school or Bo information provided by the school respecting the nature and extent of	pard to the extent that I require and am	not, in any way, relying solely upor		
2.	I freely and voluntarily assume the risks and hazards inherent in the natchild, as a participant, may suffer personal and potentially serious injury				
3.	My child has been informed that he/she is to abide by the rules and regulations including directions and instructions from the school's administrators, instructors, and supervisors as imposed on students while participating in the program or activities. This shall include his/her participation in all of the introductory sessions and meet all prerequisites prior to his/her participation in the activity or program.				
4.	In the event that my child fails to abide by the rules and regulations imposed on the student while participating in the program or activities, disciplinary action may either require that he/she not participate in the program or activity, or that I will be contacted to have him/her picked up.				
5.	I acknowledge that it is my responsibility to advise the school of any me in the stated program or activity.	edical or health concerns of my child w	hich may affect his/her participation		
6.	Based on my understanding, acknowledgement, and consents as described to participate in this program or activity.		has my permission e of Student)		
Rele	ease of Liability, Waiver of Claims and Indemnity Agreement				
In co Priv	onsideration of the acceptance of the registration of my child to participate rate School, its teachers, staff and employees (the "School") from all claim uding legal fees, in any way arising from or related to school activities both	ns for injuries, damages, losses, death,			
	knowledge that School does not warrant any personal equipment/property		equipment/property.		
Dala	ease of Responsibility				
Тор	protect student's safety, the School does not permit any student to leave t building without school's permission, the School holds no responsibilities				
Pho	otograph Release				
l am use	n aware that for the purposes of communications between parents and the d in form of photographs, videotape or audio recordings. I hereby grant pener approval from myself, my heirs, executors or administrators.				
Date	e· Name·	Signature:			

Parent/Guardian (Please Print)