



奥斯汀长城中文学校学生注册表
Austin Great Wall Chinese School Registration Form

2008-2009 School Year

Class Code (See Class List):

Do you have an account on www.agwcs.org? Yes, No

e-mail used or to be used for your account: _____ Student ID (if you know): _____

Please visit www.agwcs.org to open an account and to enter all of information you are filling out on this form before the next school day (you will be given a copy of this form at the Registration Desk).

Last Name: _____ First Name: _____

中文姓名: _____ Gender: Male, Female Date of Birth (mm/dd/yy): _____

Parent/Guardian 1: _____ Phone: _____ e-mail: _____

Parent/Guardian 2: _____ Phone: _____ e-mail: _____

Home Address: _____ City: _____ ZIP: _____

Emergency Contact: _____ Phone: _____

Please make a in the check box for your selected course and book

Time	Hours	Course	课程	Tuition	Book	Amount (\$)
2:00-3:50	2	Kindergarten	中文学前班	<input type="checkbox"/> \$130	+ <input type="checkbox"/> \$12	_____
2:00-3:50	2	Grade 1-4	中文一至四年级	<input type="checkbox"/> \$130	+ <input type="checkbox"/> \$50	_____
2:00-3:50	2	Grade 5-6	中文五至六年级	<input type="checkbox"/> \$130	+ <input type="checkbox"/> \$18	_____
2:00-3:50	2	Grade 7-10	中文七至十年级	<input type="checkbox"/> \$130	+ <input type="checkbox"/> \$22	_____
2:00-3:50	2	iChinese	爱中文	<input type="checkbox"/> \$130	+ <input type="checkbox"/> \$40	_____
4:00-5:50	2	Bilingual 1 Kids	双语幼儿 1 班	<input type="checkbox"/> \$165	+ <input type="checkbox"/> \$24	_____
4:00-5:50	2	Bilingual 1-2 Adults	双语成人 1-2 班	<input type="checkbox"/> \$165	+ <input type="checkbox"/> \$20	_____
4:00-5:50	2	Bilingual 2-4 Kids	双语幼儿 2-4 班	<input type="checkbox"/> \$165		_____
4:00-4:50	1	Art 1-3	美术 1-3 班	<input type="checkbox"/> \$80		_____
4:00-4:50	1	Chess	国际象棋	<input type="checkbox"/> \$80		_____
4:00-4:50	1	Chinese Writing	中文写作	<input type="checkbox"/> \$80		_____
4:00-4:50	1	Math 3-7	数学三至七年级	<input type="checkbox"/> \$80		_____
4:00-4:50	1	Kungfu	功夫	<input type="checkbox"/> \$80		_____
2:00-2:50	1	Taiji	太极	<input type="checkbox"/> \$80		_____
4:00-4:50	1	Yoga 1-2	瑜伽 1-2 班	<input type="checkbox"/> \$80		_____
Total Amount Due						_____

I authorize the staff of AGWCS to act on my behalf according to his/her best judgment in an emergency situation and hereby waive and release AGWCS from any liabilities for injuries and illness incurred while at AGWCS. I further acknowledge that I have read the Parents Guide that is published at AGWCS website and am aware of the responsibilities as parents/guardian of the attending student.

Parents/Guardian Name (print): _____

Parents/Guardian Signature: _____ Date: _____