

Bangor Chinese School Registration Form for Children

Parent/payer information (Please give us both parents/guardians name if applicable)

Name: _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____ Email: _____

Should we be unable to contact you in the event of an emergency, please list the name and phone number of a responsible adult we may contact.

Name: _____ Day Phone: _____

Participant Name	Sex	D.O.B.	Age	Grade	School	Fee
Balance Due						

Please list any adults or relatives that are authorized to pick up your child. Be aware that a child will not be released to those who are not listed here or not listed as parent/guardian unless prior contact is made.

Name: _____ Relationship _____

Signature: _____ Date: _____

NO REFUNDS WILL BE GIVEN AFTER A PROGRAM BEGINS