



## APPLICATION FORM

Language Classes (10.00am-12noon) (11 sessions per term)		Extra-curricular Activities (10 sessions per term)		For Office Use Only
Mandarin Class (Adult)	£150 p.a.	Adult Tai Chi (10.00am-11.00am)	£135 p.a.	Membership No.
Cantonese Class (Child) Mandarin Class (Child)	£125 p.a.	Chinese Dance (12.30pm-1.30pm) Art Class (12.30pm-1.30pm) Kung Fu (12.45pm-1.45pm)	£120 p.a.	

### 1. Student's Details\*\*

Name in English	Name in Chinese	Class/ Activity to undertake	Gender (M or F)	D.O.B. (under 18 only)	Ethnic Group Chinese (C), Non-Chinese (NC), Mixed Race (M)
1.					
2.					
3.					
<i>Correspondence Address</i>					
<i>Home Tel</i>		<i>Mobile</i>			
<i>E-mail address</i>					

### 2. Parent's Details\*\* (To be filled in for students below 18 years old)

Father's Name		<i>Home Tel</i>	<i>Mobile</i>
Mother's Name		<i>Home Tel</i>	<i>Mobile</i>

### 3. Fees

a) Fees must be paid by the 2 <sup>nd</sup> week of the term. Failure to do so may result in your names taken off the school register. Note that book costs are not included in the school fees.
b) A membership fee of £15 per year is applicable to students enrolling in extra-curricular activities. This fee is waived under 2 conditions – either an upfront yearly fee is paid in full or the student has a direct family member currently attending language classes.
c) Membership fee is only applicable once per family in a school year.
d) All cheques to be made payable to: <b>Chinese Association of Woking</b>

### 4. Fees Refund and Class Cancellation

Full refund will only be given on the first 2 weeks of the term. No refund after that unless the school cancels the class or activities. The CAW Chinese School reserves the right to alter fee, or reschedule or cancel any classes or activities when it deems necessary.
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\*\* In accordance with the **Data Protection Act 1998**, you are advised that enrolment information provided by students will be computerised and used for administrative purposes only.



### 5. Enquiries

All enquiries to [jackieho@ntlworld.com](mailto:jackieho@ntlworld.com) or post to Mrs. Jackie Ho, 121 Coresbrook Way, Knaphill GU21 2TR

### 6. Disclaimers

#### **Health and Safety**

It is the responsibility of parent to inform the school in writing of any illness or allergy that you feel the school should be aware of, including treatment and medication required.

#### **Liability**

The CAW Chinese School cannot accept responsibility for the loss of, theft or damage to students'/parents' properties.

#### **Photography**

The school may use images or pictures of yourself or your child(ren) in publications associated with CAW and CAW Chinese School. Please inform the school in writing if you wish to be excluded from these.

### 7. Student's Agreement

- I have read and will abide by the school rules and code of conduct.
- I will take responsibility for any damage to school property brought about by me.
- In case of medical emergency, the school may contact the nearest hospital's emergency unit to provide the necessary treatment.

**Signature of Student:**  
(18 years old or over)

**Date:**

### 8. Parent's Agreement (for student(s) under 18 years old)

- I have read the school rules and code of conduct by which my child(ren) and I will abide.
- It is my responsibility to drop off and pick up my child(ren) on time.
- I confirm the child(ren) I enrolled is (are) at least 5 years old or above.
- I agree to supervise at all times of any child(ren) whom I may bring to the school.
- I confirm there is no medical reason to prevent my child(ren) named above from taking part in the school activities where the venue may or may not be at the school.
- I agree to my child(ren) named above taking part in the extra-curricular activities organised by the school where the venue may or may not be at the school.
- I take responsibility for any damage to school property brought about by my child(ren).
- In case of medical emergency, the school may contact the nearest hospital's emergency unit to provide the necessary treatment.

**Signature of Parent  
or Guardian:**

**Date:**

For Office Use Only	Date	Receipt No. Issued	Issued by