



# 2019/20 ADMISSIONS FORM (入學申請表)

ATTACH  
PHOTO HERE  
(照片)

<b>OFFICE USE ONLY</b> (本機構使用)	Date Received: (收表日期)	Application Fees Received: (收申請費日期)
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Please Print (請打印)

STUDENT INFORMATION (學生信息)			
Last Name: (姓)	First Name: (名)	Preferred Name: (首選名稱)	
Date of Birth: (出生日期) dd / mm / yy (日 / 月 / 年)	Gender: (性別) <input type="checkbox"/> M (男) <input type="checkbox"/> F (女)	Nationality: (國籍)	Hong Kong Permanent Resident: (香港永久性居民) <input type="checkbox"/> Yes 是 <input type="checkbox"/> No 否
Home Address: (住宅地址)			Home Phone No.: (住宅電話)
First Language: (第一語言)	Other Language(s): (其他語言)	Toileting Language: (如廁表示)	
Current School Attending (if any): (現就讀學校(如有)):			

PARENTS/GUARDIAN INFORMATION (家長/監護人信息)	
Name of Parent 1: (家長姓名)	Name of Parent 2: (家長姓名)
Mobile Number: (手機號碼)	Mobile Number: (手機號碼)
Occupation: (職業)	Occupation: (職業)
Office Number: (辦公室電話)	Office Number: (辦公室電話)
E-mail Address: (電郵地址)	E-mail Address: (電郵地址)
Name of Guardian/Helper: (監護人/助手姓名)	Guardian's/Helper's Mobile: (監護人/助手手機號碼)

PERSONS AUTHORISED TO COLLECT CHILD (被授權接學生者)	
Name: (姓名)	Mobile: (手機號碼)
Name: (姓名)	Mobile: (手機號碼)

MEDICAL AND OTHER NEEDS (醫療和其他需求說明)
Does the applicant have any allergies, prescribed medication, health or physical concerns? <input type="checkbox"/> Yes (是) <input type="checkbox"/> No (否) (申請人是否有任何過敏, 需要處方藥, 健康或身體問題?) If yes, please give details: (如果是, 請提供詳情:)
Any other medical issues? (請列舉需要注意的醫療事項(如有))
Please inform us if there are any special circumstances (such as death, parent separation, adoption etc.) that may affect your child. (請告知是否有任何可能影響您孩子的特殊情況(如死亡, 父母分居, 收養等))

IN CASE OF EMERGENCY (在緊急情況下)	
Name of Emergency Contact: (緊急聯絡人姓名)	Emergency Contact's Mobile: (緊急聯絡人手機號碼)

PROGRAM (課程)	INTERNATIONAL STREAM (國際班)		DUAL LANGUAGE STREAM (雙語班)		SCHOOL BUS REQUIRED (校車需要)
	AM (9am - 12noon) 上午班 (9 - 12 時)	PM (1 - 4pm) 下午班 (1 - 4 時)	AM (9am - 12noon) 上午班 (9 - 12 時)	PM (1 - 4pm) 下午班 (1 - 4 時)	YES / NO (是 / 否)
<b>PRE-NURSERY/TRANSITION</b> (aged 2-3 years: birth year 2017) (2-3 歲 : 2017 年出生)					
<b>NURSERY (K1)</b> (aged 3-4 years: birth year 2016) (3-4 歲 : 2016 年出生)					
<b>LOWER KINDERGARTEN (K2)</b> (aged 4-5 years: birth year 2015) (4-5 歲 : 2015 年出生)					
<b>UPPER KINDERGARTEN (K3)</b> (aged 5-6 years: birth year 2014) (5-6 歲 : 2014 年出生)					

ADDITIONAL INFORMATION (其他信息)		
Sibling's Name: (兄弟姊妹姓名)	Date of Birth: dd / mm / yy (出生日期) (日 / 月 / 年)	Gender: <input type="checkbox"/> M <input type="checkbox"/> F (性別) (男) (女)
Sibling's Name: (兄弟姊妹姓名)	Date of Birth: dd / mm / yy (出生日期) (日 / 月 / 年)	Gender: <input type="checkbox"/> M <input type="checkbox"/> F (性別) (男) (女)
How did you learn of Fairchild Kindergarten? (你如何知悉楓薈幼稚園?)		
<input type="checkbox"/> Website (網站) <input type="checkbox"/> Word of Mouth (口碑) <input type="checkbox"/> Newspaper (報紙文章) <input type="checkbox"/> Advertisement (廣告) <input type="checkbox"/> Facebook (臉書) <input type="checkbox"/> Other: _____ (其他)		
What is the educational path you have chosen for your child? (你為孩子選擇的教育路徑是什麼?)		What are your language goals for your child? (你為孩子選擇的語言目標是什麼?)
<input type="checkbox"/> International School (國際學校) <input type="checkbox"/> Local School (本地學校) <input type="checkbox"/> Not yet decided (尚未決定)		<input type="checkbox"/> English (英語) <input type="checkbox"/> Mandarin (普通話) <input type="checkbox"/> English and Mandarin (英語和普通話)

CHECKLIST (檢查清單)	
A completed and signed Admissions Form (填妥並簽署的報名表)	<input type="checkbox"/>
One photograph of the applicant (affixed to the admissions form) (申請人的一張照片(貼在報名表上))	<input type="checkbox"/>
Copy of the applicant's Birth Certificate and/or Passport (with valid HK visa, for non-local family) (申請人的出生證明和/或護照副本(有效的香港簽證, 非本地家庭))	<input type="checkbox"/>
Copy of applicant's immunization record & Report on Physical Examination (申請人的免疫記錄複印件和身體檢查報告)	<input type="checkbox"/>
Copy of parents' HKID and/or Passport (with valid HK visa, for non-local family) (父母的香港身份證和/或護照副本(有效的香港簽證, 非本地家庭))	<input type="checkbox"/>
Application Fee of HK\$ 40 (報名費 HK\$ 40)	<input type="checkbox"/>

PARENTAL CONSENT AND ACCEPTANCE (家長同意和接受)	
1.	I declare that the information given in this admissions form is true, complete and accurate. (我聲明本報名表格中提供的信息是真實的、完整的和準確的。)
2.	I understand that only completed applications, including submission of application fee, and all required documents, will be considered for the processing of my child's application. (我明白, 只有填妥的申請, 包括遞交申請費及所有必須的文件, 才會考慮處理我子女的申請。)
3.	I understand that the school fee is payable over 11 months of the year - from August 2019 to June 2020, and to fulfill the requirements of the contract and advance fee for my child's place. (我明白學費須支付 11 個月- 從 2019 年 8 月至 2020 年 6 月 及履行合約內容及留位費。)
4.	I agree that in the event of medical need, my child should be taken to the nearest public hospital. (我同意, 如有醫療需要, 我的孩子應該被送到最近的公立醫院。)
5.	I understand that the application fee is non-refundable, non-transferable, and non-deferrable. (我明白, 申請費不可退還、不可轉讓及不可推遲。)
6.	I give my consent for Fairchild Kindergarten to use the personal data provided in this form for the purpose of processing my child's application. (我同意, 貴幼稚園使用本表格提供的個人資料, 以處理我孩子的申請。)
7.	I understand that a one-month notice of my renewal intention for the next month is appreciated. (我明白, 退學通知期為一個月。)
8.	I <input type="checkbox"/> give/ <input type="checkbox"/> do not give permission for my child to join the class walking to local parks and shops within walking distance, weather permitting (student to adult ratio will be no more than 4:1). (我 <input type="checkbox"/> 給予/ <input type="checkbox"/> 不給予我的孩子在天氣允許的情況下步行到附近公園和商店參與課程(學生與成人的比例不超過 4:1))
9.	I <input type="checkbox"/> give/ <input type="checkbox"/> do not give consent for Fairchild Kindergarten to use images of my child participating in school activities on the Fairchild Kindergarten website, social media pages, and promotional materials. (我 <input type="checkbox"/> 同意/ <input type="checkbox"/> 不同意 Fairchild Kindergarten 在網站、社交媒體平台和宣傳材料上使用孩子參與學校活動的圖像。)

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Parent/Guardian signature (家長/監護人簽名)

Date (日期)