



# 角聲兒童合唱團報名表

## Herald Children's Choir Application Academic Year 2011-2012

報名須知 NOTES TO APPLICANTS	
招生年齡 Age for Admission	Age 7 - 11
學費 Tuition	2011-2012 學年全年費用 tuition: \$150 (舊生優惠 Returning student discounted rate: \$120) 獲取錄後, 請以現金或支票繳付學費。Tuition is due upon enrollment by cash or check.
授課語言 Language of Instruction	英語 English
練習地點 Practice Location	屋崙角聲社區中心 523-525 8th Street, Oakland, CA 94607
練習日期及時間 Practice Date & Time	由 9 月 25 日開始, 每隔個星期日上課。時間為下午 3 時至 4 時。 Every other Sunday from 3pm to 4pm starting on 9/25/11.
面試 Audition	新生需出席面試 Audition is required for all new students. 面試日期 Audition Date: 9/18/11 (Sun)
報名方法 Submission of Application	◆ 郵寄/ 親身 By Mail/ In Person : Chinese Christian Herald Crusades, 536 8th Street, Oakland, CA 94607 ◆ 電郵 By E-mail: music@cchcsf.org
截止報名日期 Application Deadline	September 12, 2011 (Monday)
報名查詢 Enrollment Inquiries	如有任何查詢, 請致電(510) 893-3210 或電郵致 music@cchcsf.org。 For inquiries, please call (510) 893-3210 or email music@cchcsf.org.

申請人資料 APPLICANT INFORMATION					
姓名 Name	(English)			(中文)	
地址 Address					
出生日期 Date of Birth	(MM/DD/YYYY)	年齡 Age		性別 Gender	<input type="checkbox"/> 男 Male <input type="checkbox"/> 女 Female
聯絡電話 Telephone			電郵 E-mail		
就讀學校 School			級別 Grade		
宗教信仰 Religion			所屬教會 Home Church		
音樂及表演經驗 Music & Performing Experiences					



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## Herald Children's Choir Application Academic Year 2011-2012

### 家長 / 監護人資料 PARENT / GUARDIAN INFORMATION

姓名 Name	(English)	(中文)
與申請人關係 Relationship		聯絡電話 Telephone
職業 Occupation		電郵 E-mail

### 緊急聯絡資料 EMERGENCY CONTACT INFORMATION

緊急聯絡人 Emergency Contact		緊急聯絡人電話 Emergency Telephone
家庭醫生 Family Doctor		家庭醫生聯絡電話 Doctor's Telephone
家庭醫生地址 Doctor's Address		
醫療歷史 Medical History		

### 授權急救書 MEDICAL AUTHORIZATION

I request that above named child be permitted to participate in the Herald Children's Choir (HCC) activities. In case of illness or accident, the HCC has my authority to secure necessary medical attention. I will not hold HCC, its officers or teachers liable for medical aid rendered and will reimburse HCC for medical and other expenses incurred in his/her care. I am hereby waiving all claims against the HCC for illness, accident, injury or death occurring at the practice and performing venues.

家長 / 監護人簽署

Signature of Parent / Guardian: \_\_\_\_\_

日期

Date: \_\_\_\_\_

### 注意 NOTES :

1. 根據個人資料 (私隱) 條例, 申請人有權查閱及更改其個人資料。申請人如需查閱或更改其個人資料, 請來函本團。

Under the provisions of the Personal Data (Privacy) Ordinance, applicants have the right to request access to and correction of their personal data. Applicants wishing to access or make corrections to their data should submit written requests to the Herald Children's Choir.

2. 本申請表內之有關個人資料將僅供作為辦理報讀課程申請事宜之用, 如申請者不被取錄, 本團將於6個月內銷毀一切有關個人資料。

Personal data provided in this application form will solely be used for the admission process. All such data will be destroyed within 6 months should the application be unsuccessful.

3. 本人已詳細閱讀「報名須知」, 並明白一切已繳付之費用, 將不會以任何形式退還。

I hereby declare that I have read the "Notes to Applicants" and understand that fees paid will not be refunded under any circumstances.

家長 / 監護人簽署

Signature of Parent / Guardian: \_\_\_\_\_

日期

Date: \_\_\_\_\_