



Application Form 申請表格

STUDENT INFORMATION 學生資料

Name 兒童姓名 (English) _____ (中文) _____

Date of Birth (D/M/Y) 出生日期 _____ Age 年齡 _____

Nationality 國籍 _____ Sex 性別: 男 M 女 F

Home Tel. No. 電話 _____

Address 住址 _____

Child's First Language 兒童的母語: Cantonese 廣東話 English 英語
 Mandarin 普通話 Others 其他(請註明)

Previous school if any 曾經就讀的學校: _____

Does your child have any allergies, health or physical issues? Yes 是 No 否
您的孩子有沒有任何過敏、健康或身體上需要校方關注的地方?

If "Yes", please explain 如果“有”，請解釋: _____

Attach photo here

*(please include
student's name at
the back of photo)*
請貼上學生照片

FAMILY INFORMATION 家庭資料

		Father 父	Mother 母
Name of Parents or Guardians 家長或監護人		_____	_____
		Family Name 姓	Family Name 姓
		_____	_____
		First 名 Middle	First 名 Middle
		_____	_____
Chinese Name	中文姓名	_____	_____
Citizenship	國籍	_____	_____
Mobile	手提電話	_____	_____
E-mail	電郵	_____	_____
Company name	工作機構	_____	_____
Occupation/Position	職業/職位	_____	_____
Business Address	公司地址	_____	_____
Office Telephone no.	公司電話	_____	_____
Send mail to 通訊地址	<input type="checkbox"/> Residence 住宅	<input type="checkbox"/> Business (Father) 公司(父)	<input type="checkbox"/> Business (Mother) 公司(母)
Applicant lives with 與申請人同住	<input type="checkbox"/> Father 父	<input type="checkbox"/> Mother 母	<input type="checkbox"/> Guardian (please provide details) 監護人(請提供具體信息) _____

SIBLINGS 兄弟姐妹

Name	姓名	_____	_____	_____
Age	年齡	_____	_____	_____
School Attending	現就讀學校	_____	_____	_____

Have you attended school tour? 是否曾經來過本校參觀? Yes 是 No 否

Date Attended(MM/YYYY)? 何時曾來本校參觀(月/年)? _____

CLASS SELECTION 課程選擇

Preference* 報讀次序	Class Name 課程名稱	Preferred Date(MM/YYYY)/Time 預計上課日期 (月/年) /時間
1	PRE-NURSERY(2-3Y)/PRESCHOOL(3-6Y)/OTHERS _____	_____ AM / PM
2	PRE-NURSERY(2-3Y)/PRESCHOOL(3-6Y)/OTHERS _____	_____ AM / PM

***We will accommodate your preference as much as possible but an alternative class may be offered if required.**

我們將盡量按化您的意願安排課程(視乎學額而定), 但如有需要定我們可能提供另外課程。

Note: Class scheduling is at the discretion of Blooming Buds. Parents will be notified in advance in the event of a change.

所有課程時間安排以校方最新公布為準。若有變動, 我們會提早通知家長。

DOCUMENTS TO BE SUBMITTED AT THE TIME OF APPLICATION 請於充此遞交申請時附上以下文件:

- Completed application form
已填妥的表格
- A copy of the child's birth certificate or passport & Visa
兒童出生證明或護照及簽證複印本
- 2 self-addressed stamped envelopes
2 個已貼郵票的信封
- 2 passport photos
2 張護照相片 (approx. 大約 4.5cm X 3.5cm)
- A copy of the child's immunization record
兒童免疫記錄複印本
- Application Fee of \$40 per applicant paid either by:
報名費\$40 可任選以下其中一項方式付款
 - Cash 現金
 - Cheque made payable to "Blooming Buds International Limited" (Please write your child's name, class and your contact number on the back of the cheque)
支票付款至 "Blooming Buds International Limited" 並請於支票背面註明學生姓名, 報名課程以及聯繫方式。
 - Bank transfer into our HSBC A/C No.: 848-501193-838.
(Please send us a confirmation on the transfer so we can reconcile payment made.
銀行轉賬至我們的賬戶 No.: 848-501193-838 並請附上轉賬確認單據。

SUBMISSION OF APPLICATION 遞交申請:

- By post 郵寄 In Person 親身遞交: Unit 7 on First Floor of Island Crest, 8 First Street, HK 西營盤第一街 8 號縉城峰 1 樓 7 號舖

CONSENT FROM PARENT 家長同意欄

Please "✓" box to indicate that you have read and agree to the statement. If you disagree, please leave the box blank.

- I confirm that the information provided above is true and accurate. 本人確認上述資料正確無誤。
- I agree that in the event of a medical emergency, my child should be taken to the nearest hospital (or my requested hospital, name and address: _____).
本人同意如孩子在校內健康出現緊急情況, 校方可將他 / 她送往最鄰近的醫院或家長指定的醫院(如有, 請提供醫院名稱及地址: _____), 以得到及時診治。
- I consent to the use of photographs and videos of my child participating in school activities in publication and promotional materials. 本人同意孩子在校內拍攝的照片及影片可作公開刊登及宣傳之用。

How did you come to learn about our school? 您如何認識我們的學校?

- Website 本校網站 Facebook 面書 Friends or relatives 朋友或親戚
 Internet Search 互聯網 Newspaper/Magazine 報紙/雜誌: _____ Other 其他: _____

Personal Data (Privacy) Policy and Statement 個人資料私隱條例及聲明:

Rest assured that any data collected will remain strictly confidential. Data collected will be used only for the purpose of informing you of any future Blooming Buds programs and events. Please visit www.bloomingbuds.com.hk from time to time to obtain an up-to-date version of our Personal Data (Privacy) Policy & Statement.

籽苗將任何收集得來的資料會嚴格保密, 所有資料只用作通知家長有關籽苗將來的課程或活。閣下可隨時瀏覽本校網址 www.bloomingbuds.com.hk 獲得我們最新版本的私隱條例及聲明。

- I would like to receive more information and newsletters from Blooming Buds.
我希望接收到更多有關籽苗的資訊。

Signature of Parent/Guardian 家長簽名: _____ Date 日期: _____