

## Application for Extra-Curricular Program 課程報名表格

### Student Information 學生資料

Name 兒童姓名 (English) \_\_\_\_\_ Age 年齡 \_\_\_\_\_

Sex 性別:  男 M  女 F Date of Birth (D/M/Y) 出生日期 \_\_\_\_\_

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: \_\_\_\_\_

### Family Information 家庭資料

	Father 父	Mother 母
Name of Parents or Guardians 家長或監護人	_____	_____
	<small>Full Name 姓名</small>	<small>Full Name 姓名</small>

Mobile	手提電話	_____	_____
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E-mail	電郵	_____	_____
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### People authorized to collect the child other than Parents 除父母外的孩子接送人:

Name 姓名: \_\_\_\_\_ Telephone No. 電話: \_\_\_\_\_

Name 姓名: \_\_\_\_\_ Telephone No. 電話: \_\_\_\_\_

### Emergency Contact 緊急聯絡人

Name 姓名: \_\_\_\_\_ Telephone No. 電話: \_\_\_\_\_

Name 姓名: \_\_\_\_\_ Telephone No. 電話: \_\_\_\_\_

### Program Selection 課程選擇

	Class Name 課程名稱	Date and Time 日期及時間
1		
2		
3		
4		
5		

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：

### Remarks 備註:

- (1) All paid tuition fees are non-refundable. 所有已繳付的學費不設退款。
- (2) For all programs, there is no make-up class/refund if the student is absent or if the class is cancelled due to bad weather. (Our school follows the bad weather policy of EDB. To ensure the safety of the children, classes will be cancelled if there is red /black rainstorm, or Typhoon No. 3 or above.) 所有課程，若學生缺席或課堂因惡劣天氣取消，校方將不設補堂或退款，敬請家長留意。(本校根據教育局惡劣天氣指引，為保障學生安全，如紅色或黑色暴雨警告信號、三號或以上的颱風信號生效，課堂將取消。)
- (3) Makeup classes are provided in the event that a child misses a class due to illness. A doctor's note is required in order to qualify for a makeup class. Subject to space availability. 學生如因病需進行補堂申請時，須提供註冊醫生發出之有效病假紙。若該補堂名額已滿，恕不額外提供補堂。
- (4) Changes made to class schedules are 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。
- Please make a crossed cheque payable to “**Blooms and Buds Company Limited**” or deposit the payment into our **HSBC A/C No.: 848-501219-838**. Please fax or e-mail us the copy of the receipt.
  - 請用劃線支票繳交學費，支票抬頭為 “**Blooms and Buds Company Limited**” 或轉帳至本校匯豐銀行戶口，帳戶號碼為: **848-501219-838**。請傳真或電郵收據給本校以便確認。

### Parental Consent 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.

1.  I confirm that the information provided above is true and accurate. 本人確認上述資料正確無誤。
2.  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。
3.  I consent to the use of my child's photo for weekly newsletter publication. I understand that it will be of limited circulation to parents whose children are also attending the same class as my child. 本人同意使用本人孩子的照片刊登在每週的校訊內，只限與孩子同班之家長傳閱。
4.  I consent to the use of photographs and videos of my child participating in school activities for 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。

### 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](http://www.bloomingbuds.com.hk) from time to time to obtain an up-to-date version of our Personal Data (Privacy) Policy & Statement. 籽苗將把所有收集的資料嚴格保密，所有資料只用作通知家長有關籽苗將來的課程或活動。閣下可隨時瀏覽本校網址 [www.bloomingbuds.com.hk](http://www.bloomingbuds.com.hk) 獲得我們最新版本的私隱條例及聲明。

Please check here if you would not like to receive any communications from Blooming Buds. 如不希望接收任何籽苗的資訊，請選擇此項。

Signature of Parent/Guardian 家長簽名: \_\_\_\_\_

Date 日期 \_\_\_\_\_

#### FOR OFFICE USE ONLY

Receipt Date \_\_\_\_\_ Payment Date \_\_\_\_\_