

COURSE APPLICATION FORM 课程报名表

APPLICANT'S INFORMATION 申请者资料

Applicant's Name 申请者姓名:

Birth Cert. / NRIC No. 出生证 / 居民证号码:

Gender 性别: *Male 男 / Female 女

Current school 目前就读学校:

Age 年龄:

Nationality 国籍:

Race 种族:

Date of birth 出生日期:

Singapore PR 永久居民: *Yes 是 / No 否

Religion 宗教:

Home Tel 住家电话:

Email 电邮:

Mobile No. 手机号码:

Current address 居住地址:

Courses/subjects enrolled in 登记的课程/科目:

Current subjects' grades 目前科目成绩:

English 英文 _____ Chinese 华文 _____ Mathematics 数学 _____ Science 科学 _____ P.O.A. 会计 _____

Others 其他:

Available days & times for lessons 能够上课的天和时间:

PARENT'S INFORMATION 家长资料

(For applicants below 18 years old 如果申请者的年龄在 18 岁以下)

Parent's Name 家长姓名:

Office No. 办公室电话:

Email 电邮:

Mobile No. 手机号码:

AGREEMENT 协议

- A. I understand that the instructor will try his/her best to bring out my learning potential. I will need to cooperate with the instructor in order to achieve the desired results.
- B. If I miss any lesson, Learning Zone will try to replace the missed lesson but subject to the availability of the tutor or trainer. No extension of lesson will be given due to my late-coming.
- C. Upon registration for any course, I will need to pay the full course fees for courses that last three months or less. For courses that last more than three months, I will need to pay course fees for the upcoming month/term or remaining weeks of the present month, depending on point of registration. For subsequent months, course fees must be paid before the first day of the following month/term. A late administrative charge of \$10 may be imposed for repeated late payment of fees.
- D. No fee is refundable under any circumstance.
- E. No payment shall be made to the tutor or trainer at all times, unless he/she is a staff of Harvest Care Centre or an authorized person by Harvest Care Centre to collect fees.
- F. I understand that the course fee is differentiated from the annual registration fee. When I register for any course, I will need to pay the course fee and the annual registration fee where applicable.

SIGNATURE 签名

I verify that the information provided on this form is true and agree to the above terms.

我所提供的资料是真实的,并且同意以上的条件。

Signature 签名:

Date 日期:

FOR OFFICIAL USE ONLY:

Annual registration fee paid: \$10 ()

Receipt No.:

Staff Name / Signature:

Date: