

UCA COMMUNITY LANGUAGE SCHOOL CHILDREN'S REGISTRATION FORM

Chinese for Children - Fall 2018

			Today's Date:		
Child's First NameLast Name		Birthdate			
Parent's name(s)	Preferred phone(s):				
E-mail(s)	Street Address				
City & State	Zip Code				
Allergies or Any Relevant Medica	l Conditions:				
CONSENT STATEMENT: I give m these images/recordings may be use fliers/brochures/university-sponsor promotional materials for the UCA training).	ed, strictly in accordance with ed web pages and other online CLS program, and also for o	university policies and the laws UCA-related sites, newspaper ccasional educational purposes	s of Arkansas, j or magazine fe	for the purpose of creating vature articles and other	
Parent/Guardian Printed Name	Si	gnature		Date	
Return registration form(s) w UCA Confucius In	ith check made payable to stitute	d pay \$125; with 2 kids: \$	3225; and wit	h 3 kids: \$325]	
Tel. (501) 852-5219 Email: C. I. Director	ve, Conway, AR 72035 , Dr. Guo-ou Zhuang gshu		\$	Total enclosed	
, ,	e School Director: Cheryl S				
	OFFIC	E USE ONLY			
Date Payment rec'd		Siblings names:			
Form of payment: check #		Cash (amount)			
Receipt #	eceipt # Refund date & amount				
Date of Deposit		Notes:			