Agape Learning Centre Registration 2020 - 2021

Student Name:_____. _____ ( ) Date of Birth: ____/_____ Age:____ Sex : M/ F
PRINT Last Name, First Name Chinese mm / yy

Day School:_____ Grade before Sept 2020 _____ After Sept_____.

Guardian: _____ Relationship: _____ Email: ._____.

Address: _____ .____ . _____/_____ .
Number Street City Postal Code Home Phone Cell Phone

Student's Gmail format: firstname{any number between 2 -9}lastname@gmail.com e.g. john2chen@gmail.com.

Student's Gmail address:_____@gmail.com

Does the student have allergy? ☐ Yes ☐ No Allergy: _____ .

Brothers / sisters enrolled in our program:_____ .
Name & Class

Release and Indemnity Agreement:

The undersigned agrees to release and discharge Agape Learning Centre, Inc. and Agape-Charis Learning Centre, its directors, staff, volunteer workers of and from all claims of negligence or otherwise made by or on behalf of the student named above, his or her guardians or their executors, successors, administrators against all claims, demands, judgments and costs in any way arising out of, or relating to the student's participation in the program. If any accident occurs and I cannot be located immediately, I give permission to the staff of Agape Learning Centre, Inc. and Agape-Charis Learning Centre to seek medical treatment for the student named above and I understand that I will be responsible for any extra cost not covered by OHIP.

I have read the registration information. I realize that **tuition fee is non-transferrable, it can be refunded before August 15, 2020 but a registration fee of $40 per course will be deducted, tuition fee is non-refundable after August 15, 2020 regardless registration date** and if student's behavior causes serious problems, Agape Learning Centre, Inc. / Agape-Charis Learning Centre has the right to dismiss him/her **without any refund**.

Signature of Grade 11 or 12 student: _____.

Date: _____ Signature of Guardian: _____ .

Please check "√" the Campus: ☐ Bayview Hill ☐ Central Park

Please check "√" and write the time of the class the student will enroll in 2020 – 2021. (For new students, please refer to the Registration Guidelines to fill out this portion.)

	Subject	Class enrolled in 2019 - 2020			Virtual Class on Saturday to be continued in 2020 - 2021					Virtual Class on Weekday in 2020 - 2021			
		Class	Time		Class	Time	√	Fee $		Class	Day	√	Fee $
1	Chinese												
2	Math												
3	English												
4	French												
5	Drawing												

Please write a cheque of the total tuition fee payable to **Agape Learning Centre.** Send the cheque with this completed form and a returned envelope (with a stamp) to our office or come in person when the office opens.
Office address: 40 Vogell Road, Unit 29, Richmond Hill, ON, L4B 3N6.

Office use

Campus	Chinese	Math	English	French	Others	Total $	Receipt	Remark
	$	$	$	$	$	$		