

Date: \_\_\_\_\_ Number: \_\_\_\_\_

**First Ave. Education Inc.**  
222 S. First Ave.,  
Arcadia, CA 91006



Phone: (626) 821-1025; (626) 518-2309  
Email: firstaveeducation@gmail.com  
Website: www.firstaveeducation.com

## 2024暑期 報名表

英文名字 \_\_\_\_\_ 兄弟姐妹 \_\_\_\_\_ 中文名字 \_\_\_\_\_

男/女 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
性別 出生年, 月, 日 就讀學校

中文程度 \_\_\_\_\_ 中文課本 \_\_\_\_\_ 年級 \_\_\_\_\_ 九月一日後年齡 \_\_\_\_\_

**For Office Use Only:**  
Registration No. \_\_\_\_\_  
Amount: \_\_\_\_\_  
CA/CK#CC: \_\_\_\_\_  
Date: \_\_\_\_\_  
Session: \_\_\_\_\_

居家地址 \_\_\_\_\_ 城市 \_\_\_\_\_ 郵遞區號 \_\_\_\_\_

父親姓名 \_\_\_\_\_ 父親工作或家中電話: \_\_\_\_\_ 父親手機號碼: \_\_\_\_\_

父親電郵地址 \_\_\_\_\_

母親姓名 \_\_\_\_\_ 母親工作或家中電話: \_\_\_\_\_ 母親手機號碼: \_\_\_\_\_

母親電郵地址 \_\_\_\_\_

其餘可以連絡者 姓名電話: \_\_\_\_\_

其餘可以連絡者電郵地址 \_\_\_\_\_

請在下面選課

A. 全天 \_\_\_\_\_

B. 半天 \_\_\_\_\_

附註 \_\_\_\_\_

Full payments must be paid on or before class starts. Late payments will subject to a 10% late fee.  
Refund Policy: Full Refund minus registration fee before class starts. No refund after class starts (but will prorate and credit to our Afterschool Program or our Saturday Chinese Program only).  
Zelle pay: Firstaveeducation@gmail.com