



Shu Ren International School

Summer Program 2009 (June 22 – August 14)

Registration Form

www.ShuRenInternationalSchool.com

1333 University Avenue, Berkeley, CA 94702

Phone: (510) 981-0320 and (510) 981-0291

I. Contact Information

Student's Name	English
	Chinese
Date of Birth	
Gender	Male Female
Address	
School Currently Attending	Name
	Address
	Grade in Sept. 2009
Mandarin Language Level	Beginner Intermediate Advanced
Briefly describe language level	
Parent / Guardian 1	Name
	Adress
	Day Time Phone
	Cell Phone
	Email
Parent / Guardian 2	Name
	Address
	Day Time Phone
	Cell Phone
	Email
Additional Individuals Authorized to Pick Up the Student	Name
	Day Time Phone
	Cell Phone
	Email
Additional Individuals Authorized to Pick Up the Student	Name
	Day Time Phone
	Cell Phone
	Email
If a medical emergency occurs, 911 will be called. List any medical information:	

II. Registration and Fees

Please select one program: ___ Pre-K (ages 3-4) Mandarin Immersion Camp
 ___ K and up (ages 5-10) Mandarin Immersion Camp

Session One (June 22 - July 2) (No Camp on July 3)

Half Day ¹	8:30am - 11:30am	\$ 400	\$ _____
Full Day	8:30am - 3:00am	\$ 600	\$ _____
Extended Care			
Morning only	7:30am - 8:30am	\$ 50	\$ _____
Afternoon only	3pm - 6pm	\$ 110	\$ _____
Morning/Afternoon	7:30am - 8:30am, 3pm - 6pm	\$ 130	\$ _____
Drop-in Care			
(Pre-paid card @\$10/hour)		\$ 40	\$ _____
		\$ 80	\$ _____
		\$ 120	\$ _____
		\$ 160	\$ _____
		\$ 200	\$ _____
Registration Fee (non-refundable)		\$ 25	\$ _____

Total Session One: \$ _____

Session Two (July 6 - July 17)

Half Day ¹	8:30am - 11:30am	\$ 400	\$ _____
Full Day	8:30am - 3:00am	\$ 600	\$ _____
Extended Care			
Morning only	7:30am - 8:30am	\$ 50	\$ _____
Afternoon only	3pm - 6pm	\$ 110	\$ _____
Morning and Afternoon	7:30am - 8:30am, 3pm - 6pm	\$ 130	\$ _____
Drop-in Care			
(Pre-paid card @\$10/hour)		\$ 40	\$ _____
		\$ 80	\$ _____
		\$ 120	\$ _____
		\$ 160	\$ _____
		\$ 200	\$ _____
Registration Fee (non-refundable)		\$ 25	\$ _____

Total Session Two: \$ _____

Session Three (July 20 - July 31)

Half Day ¹	8:30am - 11:30am	\$	400	\$ _____
Full Day	8:30am - 3:00am	\$	600	\$ _____
Extended Care				
Morning only	7:30am - 8:30am	\$	50	\$ _____
Afternoon only	3pm - 6pm	\$	110	\$ _____
Morning and Afternoon	7:30am - 8:30am, 3pm - 6pm	\$	130	\$ _____
Drop-in Care				
(Pre-paid card @\$10/hour)		\$	40	\$ _____
		\$	80	\$ _____
		\$	120	\$ _____
		\$	160	\$ _____
		\$	200	\$ _____
Registration Fee (non-refundable)		\$	25	\$ _____

Total Session Three: \$ _____

Session Four (August 3 - August 14)

Half Day ¹	8:30am - 11:30am	\$	400	\$ _____
Full Day	8:30am - 3:00am	\$	600	\$ _____
Extended Care				
Morning only	7:30am - 8:30am	\$	50	\$ _____
Afternoon only	3pm - 6pm	\$	110	\$ _____
Morning/Afternoon	7:30am - 8:30am, 3pm - 6pm	\$	130	\$ _____
Drop-in Care				
(Pre-paid card @\$10/hour)		\$	40	\$ _____
		\$	80	\$ _____
		\$	120	\$ _____
		\$	160	\$ _____
		\$	200	\$ _____
Registration Fee (non-refundable)		\$	25	\$ _____

Total Session Four: \$ _____

Total Early Bird Discount: \$ _____
Total All Sessions: \$ _____

Notes:

1. No childcare is available from 11:30am – 3:00pm for half day students.
2. No camp on July 3.
3. \$50 Early Bird Discount off tuition for each session for full day students (\$25 Discount for half day students) if all registration forms are in and tuition is paid in full by March 31.

III. School Policies

Please initial each of the items below to indicate that you have read and understand the statements.

_____ **Behavior Policy:** I understand that my child is expected to follow all rules established by his or her instructor, and any failure to comply will result in dismissal from the program. I also understand that no refunds will be given under such circumstances.

_____ **Cancellation and Refund Policy:**

- Registration fee \$25 is not refundable.
- Full tuition and fees will be refunded if you cancel one month before the session starts. 50% of the tuition and fees can be refunded if you cancel two weeks before the session starts. No refund will be issued if you cancel within two weeks before the session starts or after the session starts.
- We will return the full payment when cancellation is for medical reasons (A doctor's note and letter requesting the exception is needed) or a family emergency.
- No refund will be given for: a dismissal due to disciplinary action, homesickness, late arrival, early departure, vacation and so on.
- Written (including email) notice is required to cancel or change your registration.

_____ **Transfers:** I understand that a \$15 service fee is required to transfer from one session to another.

_____ **Returned Checks:** I understand that a \$25 fee will be charged for returned checks.

IV. Wavier Statement

I give permission for my child, _____ to participate in the above listed Summer Program(s) at Shu Ren International School. In doing so, I hereby absolve Shu Ren International School from all liability that may arise as the result from above named child's participation in the activities listed above. I recognize and acknowledge that there are certain risks inherent in my child's participation in said program and I agree to assume the risk of accident or injury sustained in connection with the program. I further release Shu Ren International School, its officers, employees, agents and volunteers from all liability that may arise as the result from above named child's participation in the listed activities. I realize that Shu Ren International School is not responsible for lost or stolen articles. I have read and fully understand the terms of this Waiver, Release and Indemnity.

Parent/Guardian 1 signature

Date

Parent/Guardian 2 signature

Date