

Summer School 2019 Application

Student Name: _____

Current School: _____ Current Grade: _____

Date of birth: day / month / year Age: years months

【Only Non-Yoyogi Students】

Child's Nationality: _____ English Level: _____

Home address: _____

〒 _____ Home Phone: _____

E-mail Address: _____

Father's name: _____ Cell phone: _____

Mother's name: _____ Cell phone: _____

Father's E-mail Address: _____

Mother's E-mail Address: _____

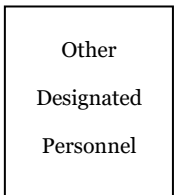
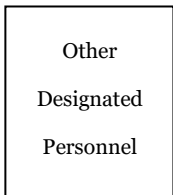
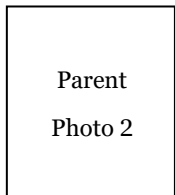
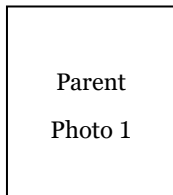
Food allergies/Dietary restrictions: _____

Please provide 2 contact persons' information (other than parents) to be contacted in case of emergency and parents cannot be reached.

Name: _____ (Relationship) _____ Tel. _____

Name: _____ (Relationship) _____ Tel. _____

Parent Photos & Emergency pick-up list:



Name: _____ Name: _____ Name: _____ Name: _____

* Students will not be released to any individuals who are not listed on this form.

Please choose the Programme # (1-4) and write the numbers in the calendar below.

Programme #

1. **Little Penguins (A)**
2. **Preschool/Kindergarten Programme**
[Little Penguins (B), Penguins, Seals, Dolphins]
3. **Primary Programme**
4. **Intensive Japanese Programme** for Primary students (June 10-July12)

	Monday	Tuesday	Wednesday	Thursday	Friday
Week 1	6/10	6/11	6/12	6/13	6/14
Programme #					
Week 2	6/17	6/18	6/19	6/20	6/21
Programme #					
Week 3	6/24	6/25	6/26	6/27	6/28
Programme #					
Week 4	7/1	7/2	7/3	7/4	7/5
Programme #					
Week 5	7/8	7/9	7/10	7/11	7/12
Programme #					
Week 6		7/16	7/17	7/18	7/19
Programme #					
Week 7	7/22	7/23	7/24	7/25	7/26
Programme #					
Week 8	7/29	7/30	7/31	8/1	8/2
Programme #					
Week 9	8/5	8/6	8/7	8/8	8/9
Programme #					

Tuition Payment (Please check the appropriate box):

- Invoice Home Invoice Company

Company Name: _____

Company Address: _____

Attention to: _____

Change Days/Add Days/Cancellation

(example) Change: ① 7/1(Mon) #2 → 7/9(Tues) #2 _____

Student Name: _____

【Change Days】

*Days can be changed to other days **up to three times** from the original registered date

(For Office use only)

	Date	Proceeded by	Parents Signature
① _____			
② _____			
③ _____			

【Cancellation】

(For Office use only)

	Date	Proceeded by	Parents Signature
▪ _____			
▪ _____			
▪ _____			

【Add Days】

(For Office use only)

	Date	Invoice issued	Payment
▪ _____			
▪ _____			
▪ _____			
▪ _____			
▪ _____			
▪ _____			
▪ _____			
▪ _____			
▪ _____			
▪ _____			

Notes: