

基督教香港崇真會

西貢樂育幼稚園 TSUNG TSIN MISSION OF HONG KONG SAI KUNG LOK YUK KINDERGARTEN

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《入學申請表 APPLICATION FORM 2024-2025》

報讀班級 Class		□低班(K.2) □下午班 A □高班(K.3) □全日班 V **請填寫優先次 Please fill in	Morning Class Afternoon Class Whole-day Class 序,「1」為最優先,其次為「2」及「3」。 the priorities, "1" is the highest priority, y "2" and "3".	
中文姓名 Name in Chinese			性別 Sex	貼近照(證件相) Paste a photo
英文姓名 Name in English			出生地點 Place of birth	
出生日期 Date of birth			出生證/證件號碼 Birth Cert. / Passport No.	
住址 Address				
通訊地址(如與以上住址相同,可毋須填寫) Correspondence Address (if different from the above address)				
父親姓名			職業Occupation	
Name of I			聯絡電話 Contact No.:	
母親姓名 Name of Mother			職業Occupation	
			聯絡電話 Contact No.:	
1)報名時請繳交下列文件及費用(繳交之費用及文件,不設退還、延用或轉用) □出生證(或居港證明文件)副本 □教育局發出之有效「註冊證」 □防疫注射卡(針卡)副本(正背面:正面有學生姓名,另一面注射紀錄) □報名費 \$40 Please submit the application form along with the application fee (HK\$40) and the required documents as follows: (Fees paid and documents submitted are non-refundable, non-deferrable, and non-transferable.): □ A copy of birth certificate (or Hong Kong residency document) □ A valid "Registration Certificate" issued by the Education Bureau □ Copy of immunization card (both the front side, showing the student's name and the back side, showing the vaccination record) □ Application fee of \$40 NOTES NOTES				
	a)報名	日期 Date of Application		
備註 Remarks	b)本人希望書信往來或通告等以右列語言編印。 中文 English Please indicate your preference for the language used in the notice printed.			
	Sibl	B兄/姊在本校就讀班別或父/母/兄/姊在本校畢業年 ing at school or the year of graduation of parent/sibli case provide copy of certificate.)	ing. (姓名 Name:	生年份 Year of graduation:)