

## Ming Wai Int'l Kindergarten & Ming Wai Int'l Preschool

## **Application Form (North Point Branch)**

入學申請表(北角分校)

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申請人中文姓		Â	名號	Applicant's Surname G	ven Name		
Place of Birth 出生地點				Nationality 國籍			
五生地點				四有			
Date of Birth 出生日期(D)(M)(YY)				Sex 性別 Male 男 Female 女		Diagon office	
						Please affix applicant's	
Hong Kong Birth Certificate or Passport Number 香港出生證或護照編號				Date of Enrollment 申請入讀日期		recent photo here 請貼上申請人近照	
	Program 課程 International Curriculum 國際			課程 Local Curriculum 本地課程			
Applying for: 申請入讀:	Session 時段		Full Day 全日	Morning 上午       Afternoon 下午			
	Class 班級		, , , ,	Nursery Class 幼兒班		Upper Class(afternoon only) 高班(只設下午班)	
Father's Name		Occupation	Name of Organization	Contact Phone 聯絡電話			
父親姓名			職業	機構名稱	柳 ≪ 电 ⊶		
Mother's Name			Occupation	Name of Organization	Contact Phone		
母親姓名			職業	機構名稱	聯絡電話		
Guardian's Name 監護人			Occupation 職業	Name of Organization 機構名稱	Contact Phone 聯絡電話		
Residential Address					Home Phone		
住宅地址					住宅電話		
E-mail							
電郵					傳真		
Name of previous school attended						Class 班別	
曾在何校就讀							
Names of paren	ts or sibling	s who	are alumni of Ming Wai and	their year of graduation			
曾在本校就讀父	母/兄弟姊妹	姓名及	.畢業年份				
Name and class 現就讀本校之兄	_		re currently enrolled at Ming	Wai			
Parent's Signature						Date of Application	
家長簽署						Я	
address (i.e. tell by post with che If the child was of stay. 填妥後連同申請	ephone bill) eque payab not born in 人出生證明	, 4 self le to 'M Hong I 書副本	f-addressed and \$3 stamped Jing Wai International Preso Kong, please provide a cop 、免疫注射記錄(正頁和內頁	pplicant's Birth Certificate, Immunization Record envelopes with application fee (non-refundablehool' to "Ground Floor ,10-12 Tsat Tsz Mui Roay of his/her passport, including the pages show	e) of HK\$40 d, North Po ing the pho	0 in cash to school in person or bint, Hong Kong." bto, name and permitted length	
交回,或以支票	,抬頭「明	慧國際	幼兒園」郵寄本校以下地址	::香港北角七姊妹道 10-12 號地下。			

如不是香港出生者,必須連同護照影印本:包括有相片、姓名及批准逗留日期之頁面。