

**Oregon Hope Chinese School Preschool
Waiting List Application Form**

School Year applying: 20 _____ ----20 _____ **Program applying:** 3's 5day 3's 3day 3's 2day
(First priority will be given to students who enroll in 5-day classes.)

Class hour applying: AM8:30-11:30 PM 1:00-4:00

Student information

1) _____ 2) _____ 3) _____
Child's name first middle last name Child is to be called Birth date and sex

4) _____ 5) _____ 6) _____
Home phone number Home address City/state/zip code

7) Please circle with whom the child resides: Parents Father Stepfather Mother Stepmother Guardian

Parents or guardians information

8) _____
Relationship Name Home phone Cell phone

Employer Occupation Work phone

9) _____
Relationship Name Home phone Cell phone

10) _____
Employer Occupation Work phone

14) _____
E-mail address You may be contacted through e-mail for information and our future events.

Please provide the following information:

How do you hear about our preschool?

Why are you interested in our preschool?

Do you have any Chinese heritage or connection? Please explain:

I have enclosed **\$100 (non-refundable)** application fee payable to OHCS with this form

Parent Signature: _____ Date: ____/____/____

Please return this form along with your \$100 non-refundable Registration fee to school mailing address:

Oregon Hope Chinese School
4010 NW Kaiser Rd
Portland, OR 97229

Your spot in the class **will not** be held until the \$100 non-refundable registration fee is received

For office use only: No. _____	Date received ____/____/____
with payment of \$ _____ by _____	Check # _____