





Vietnamese Language and Culture Program 9:30-12:00 p.m. at Tenderloin Recreation Center **REGISTRATION FORM**

Parents/guardians are responsible for providing updated information. Information marked with * is required.

Please mail the completed form to Au Co Vietnamese Cultural Center, P.O. Box 347042, or fax to 415-440-9297, or drop it off at the Tenderloin Recreation Center. We will notify you of child enrollment status.

		\$	Student Informa	tion		
* Student:						
	Last	Midd	dle	First	(Vietname	se name, if any)
* Date of Birth	(MM/DD/YY):		* Ma	le * 🗌 * Fema	$ule * \square$	
* Home Addres	s:					
Street Number	Street	Apt. #	,	ΓΡ/City	ZIP	
* Phone Numbe	er:		* E-mail:			_
	the dates for wh					
Saturday 7/09	Saturday 7/16	Saturday 7/23	Saturday 7/30	Saturday 8/6		
		Parents/Guar	rdian Informatio	on (If applicable	e)	
* Mother:						
Last		Middle	First	Occupation		
* Phone Numbe	er:	D.			C 11	
ψ Γ '1		Day	Evening	T 7° 4	Cell	7
			Contact languag	e: Vietnamese	E L English L	
* Father:		Middle	First	 -	O a aum ati au	
w DI NI				•	Occupation	
* Phone Numbe	er:	Day	Evening		Cell	
* E-mail:		,		e: Vietnamese		
* Emergency C	ontact:					
			Name	Phone Nui	nber	
		I	Medical Informa	tion		
	cribe any physical e considered for y					

Dr			Phone Nun	ahar			
Health insurance:			1 none ivan		oup #·		
Siblings in Program:							
In the event that I cannot be	e reached by	the Cente	er, please n	otify one	of the foll	lowing peop	ple. They are
authorized to act in my absen <u>Name</u>		y also pick	k up my chil			3 7 7	
* Parent's Signature				-			
eneral Kegulations							
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