



## Childcare Application Form (Full Fee)

入學申請表格 (自費)

Date of Application 申請日期:     /     /

### Program Type 服務選擇

- ( ) Acorn 愛群 : Toddler \_\_\_\_\_ Preschool \_\_\_\_\_  
( ) Family Childcare 家庭托兒 : Brighton \_\_\_\_\_ South End \_\_\_\_\_ Mission Park \_\_\_\_\_  
( ) Red Oak 紅屋 : School Name 學校名稱: \_\_\_\_\_ Grade 年級 \_\_\_\_\_

### Family Information 家庭資料

**Child 孩子**      Special Need 特殊需要: Yes 是       No 否

Last Name 姓氏: \_\_\_\_\_ First Name 名字: \_\_\_\_\_

DOB 出生日期: \_\_\_\_\_ Gender 性別: \_\_\_\_\_

#### Parent/Guardian 家長或監護人 1

Last Name 姓氏: \_\_\_\_\_ First Name 名字: \_\_\_\_\_ Gender 性別: \_\_\_\_\_

Phone/Cell 手機號碼: \_\_\_\_\_ Email 電郵地址: \_\_\_\_\_

Address 家居地址: \_\_\_\_\_

#### Parent/Guardian 家長或監護人 2

Last Name 姓氏: \_\_\_\_\_ First Name 名字: \_\_\_\_\_ Gender 性別: \_\_\_\_\_

Phone/Cell 手機號碼: \_\_\_\_\_ Email 電郵地址: \_\_\_\_\_

Address 家居地址: \_\_\_\_\_

Please return application to BCNC, 38 Ash Street, Boston, MA 02111 or Email to [kathy.choi@bcnc.net](mailto:kathy.choi@bcnc.net)  
請將申請表格交回: 38 Ash Street, Boston, MA 02111 或電郵 [kathy.choi@bcnc.net](mailto:kathy.choi@bcnc.net)

Parent/Guardian Signature  
家長或監護人簽名

Date signed  
簽名日期