

CAFC LEARNING CENTER
STUDENT APPLICATION FORM

STUDENT'S INFORMATION			
Name:		ID#:	
Current Grade:		Tel:	
School:			
Address:			
PARENTS' INFORMATION			
Mother		Father	
Cell:		Cell:	
Yes / No	Receive Text Message	Yes / No	Receive Text Message
E-mail:		E-mail:	
APPLYING FOR:			
After School Program	Pre School Program	Summer Program	
Chinese	Spanish	ESL	
Language Art:	Vocab Workshop:	Intensive Reading and Writing	
AMC 8	AMC 10	SAT II Math	
SAT Critical Reading	SAT Writing	SAT Math	
Art: (oil painting)	Chinese Water Color Painting 国画:	Crafts 手工	
Gu Zheng 古筝	Chinese Martial Art:	Folk Dance	
Health Qigong			
* Food Allergy: Yes No			
REMARK:			
Drop off By (Relation):			
Pick Up By: (Relation):			