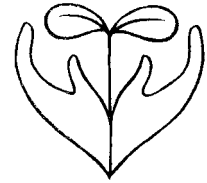


ASIAN HEALTH & SERVICE CENTER
 育苗学前双语融入学校
Yu Miao Chinese Immersion Preschool
 Phone: (503) 872-8822 Fax: (503) 872-8825



3633 SE 35th Place, Portland, OR 97202

www.ahscpx.org

Yu Miao Chinese Immersion Preschool 2008-2009 Enrollment Wait list Request Form

Child's Name: _____ Birth date: ___/___/___ Sex: _____
 Birthplace: _____ Previous school: ___ None ___ Day care ___ Preschool
 Mandarin Level: ___ None ___ little ___ good Potty Trained: ___ Yes ___ No
 Parent's Name: (1) _____ (2) _____
 Address: _____ ZIP: _____
 Phone: (Home) _____ (Cell) _____ (Work) _____
 E-mail: _____ Best way to contact: _____

Note: You will be contacted through e-mail for information and our future events.

Please provide the following answers:

How do you hear about our school? _____

Why are you interested in our school? _____

Do you have Chinese heritage or connection? Please explain _____

I have enclosed **\$50 (non-refundable)** application fee with this form
 (Please write your check payable to : **Asian Health & Service Centre**)

Parent Signature: _____ Date: ___/___/___

For office use only: No. _____

Date received ___/___/___ with payment of \$ _____ by _____