



ASIAN HEALTH & SERVICE CENTER
 育苗学前双语融入学校
Yu Miao Chinese Immersion Preschool
 Phone: (503) 503-775-3767 Fax: (503) 872-8825
 5239 SE Woodstock Blvd., Portland, OR 97206
 www.ahscpx.org



Yu Miao Chinese Immersion Preschool Enrollment Wait list Request Form

Year applying: 10-11 11-12 12-13 **Class applying:** P1(3-4 y.o.) P2(4-5y.o.)

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 may 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 any Chinese heritage or connection? Please explain:

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

Program which I prefer: *5 full day 5 half day 3 full day 3 half day
 (* first priority will be given to 5FD, then 5HD, 3 FD and then 3 HD)

Parent Signature: _____ **Date:** ____/____/____

For office use only: No. _____

Date received ____/____/____ with payment of \$_____ Check # _____ Cash

received by: _____