



Hong Kong Language Training Center

Summer Program 2005 Enrolment Form		Course Code :
1. STUDENT INFORMATION (Student No. _____)		
Name (English) _____	Name(Chinese): _____	Photo 照片
Course Title _____	Gender: <input type="checkbox"/> M <input type="checkbox"/> F	
Birthday _____	Nationality _____	
HKID/Passport No. _____		
Mailing Address _____		
Names of Parents or Guardians _____ <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Guardian		
Telephone (O) _____	Mobile _____	
Telephone (N) _____	Fax _____	
E-mail _____		
Parent Names _____		
2. COURSE DETAILS		
Language to learn: <input type="checkbox"/> English <input type="checkbox"/> Mandarin <input type="checkbox"/> Cantonese <input type="checkbox"/> Japanese <input type="checkbox"/> German <input type="checkbox"/> French		
Current Class at School: Kindergarten <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 Primary <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6		
Name of Current School _____		
Course Duration: <input type="checkbox"/> 2 weeks <input type="checkbox"/> 3 weeks <input type="checkbox"/> 3 months <input type="checkbox"/> Others: _____		
Desired Start date _____ (dd/mm/yy)		
Day preferred <input type="checkbox"/> MON <input type="checkbox"/> TUE <input type="checkbox"/> WED <input type="checkbox"/> THR <input type="checkbox"/> FRI <input type="checkbox"/> Sat		
Time preferred _____		
Remarks: _____		
3. METHOD OF PAYMENT		
Payment by Cheque – payable to “Hong Kong Language Training Centre Ltd” HSBC Account Number: 502- 423-676- 838 28/F Soundwill Plaza, 38 Russell Street, Causeway Bay, Hong Kong		
4. IMPORTANT NOTES		
◆ Full payment is required with registration and it is non-refundable & non-transferable. ◆ Course fee is payable in advance prior to course commencement ◆		
5. SIGNATURE		

Signature: _____

Date: _____