



TRIAL REGISTRATION FORM

(please tick in the appropriate box)

CHILD'S INFORMATION		
Full Name (Please underline surname):		Gender : Boy Girl
Name in Chinese Characters(if any) :	Date of Birth (dd/mm/yy):	Age:
PRIMARY CONTACT (parents/guardian)		
Name :	Relationship: Father Mother Guardian	
Email Address :		Mobil Phone No:
Home Address :		Home Phone No :
TRIAL CLASS INFORMATION		
Preferred Time :	Preferred Day: Mon Tue Wed Thu Fri Sat	
Confirmed Trial Date :	Confirmed Trial Time	
LEAP PRESCHOOL :	LEAP ENGLISH :	LEVEL MANDARIN :
L.E.A.P TOTS (1.5 yrs - 2.5 yrs) <input type="checkbox"/>	LEVEL 1 <input type="checkbox"/>	Xing Xing 1 <input type="checkbox"/>
L.E.A.P N1 (2.5 - 3.5 yrs) <input type="checkbox"/>	LEVEL 2 <input type="checkbox"/>	Xing Xing 2 <input type="checkbox"/>
L.E.A.P N2 (3.5 - 4.5 yrs) <input type="checkbox"/>	LEVEL 3 <input type="checkbox"/>	Tai Yang 1 <input type="checkbox"/>
L.E.A.P K1 (4.5 - 5.5 yrs) <input type="checkbox"/>	LEVEL 4 <input type="checkbox"/>	Tai Yang 2 <input type="checkbox"/>
L.E.A.P K2 (5.5 - 6.5 yrs) <input type="checkbox"/>		
TERMS & CONDITIONS :		

1. No Parents are allowed to accompany children
2. No photography, video, audio or other recordings permitted inside our classroom
3. We advise all children to bring along a water bottle
4. The school reserves the right to change the teachers as deemed appropriate or necessary. The school is not required to provide prior notice for such arrangement
5. The school reserves the right to reschedule or cancel trial classes as deemed necessary
6. Parent should follow and obey the school rules during the trial class

I have read and agree to abide by the Terms & Conditions stated above. In addition, I authorize L.E.A.P to send helpful communications to me via email/SMS/phone with information on their products and/or services or for market research purposes.

NAME & SIGNATURE :	ID NO :	DATE :