



# Trung Tâm Việt Ngữ Lạc Hồng

9230 Gold Coast Dr. SD. 92126 - www.LacHongSD.org - Email: LacHongSD@gmail.com - P.O. Box 262274 SD, CA 92196

## Registration Form for 2019-2020 School Year

Mother's name: \_\_\_\_\_ Father's name: \_\_\_\_\_

Mother's Cell: (\_\_\_\_\_) \_\_\_\_\_ Father's Cell: (\_\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ E-mail: \_\_\_\_\_

Add'l Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

### Student Information

	Last	Middle	First	Date of Birth	Current School Grade
1					

\* If you wish to register more than 1 child, please pick up an addition form.

We speak mainly Vietnamese at home. Yes \_\_\_\_\_; No \_\_\_\_\_ Interest in continue/start in BVN (Music Program). Yes \_\_\_\_\_

Please list any allergies, special needs, or concerns for your child so that our teachers/administrators may provide your child with a safe and nurturing environment: \_\_\_\_\_

## Release/Waiver for Lac Hong VLCC

I / We, the undersigned parent/person, having legal custody/guardianship of the above minor(s), do hereby authorize Lac Hong Vietnamese Language and Cultural Center (LHVLCC) as agent for the undersigned to consent with respect to said minor(s), to any x-ray examination, anesthetic, medical, dental, or surgical diagnosis to treatment, and hospital care which is deemed advisable by, and is to be rendered under general or specific supervision of any, physician and surgeon licensed under the provisions of the California Medical Practice Act on the medical staff of any hospital, whether such diagnosis or treatment is rendered at the office of the physician or at the hospital. I understand & agree that LHVLCC is not responsible for costs incurred for medical care.

I/We release LHVLCC, its directors, officers, employees and volunteers (collectively "Releases") from all liability to me for any loss or damage to property or injury or death to person, whether caused by Releases or otherwise and while such minor is in or near LHVLCC facilities and agree not to sue Releases for any loss or damage, injury or death described above and I will indemnify and hold harmless Releases and each of them from any loss, liability, damage or cost they incur due to said minor's presence in, upon or near LHVLCC facilities, whether caused by the negligence of Releases. I assume full responsibility for, and risk of bodily injury, death or property damage due to the negligence of Release or otherwise.

I/We understand the above information and in signing below, accept these conditions in enrolling my child(ren) in LHVLCC's Vietnamese language school.

\_\_\_\_\_ Initial I / We hereby consent to any photography, recording and/or videotaping of me/my child(ren) for the distribution, publication and public broadcasting of LHVLCC in any manner LHVLCC deems appropriate and I waive any rights of privacy that I otherwise might have in its contents.

\_\_\_\_\_ signed on \_\_\_\_\_ Date \_\_\_\_\_ in San Diego, CA  
Parent/Guardian Signature

### For Lac Hong Use ONLY:

#### Registration for 2019-2020 School Year:

\$230 + \$20 textbook (non-refundable)  
= \$ 250 Total

\_\_\_\_\_ Payment Received By

\_\_\_\_\_ Date Received