

2020 SWAN Weekend Virtual Program Mandarin Conversational Class

12/5/2020, First Day of Class
Beginner Level @ 9:00am – 9:45am
Intermediate Level @ 10:00am – 10:45am
Pre-Kindergarten to 1st Grade ONLY
(Max. 8 CHILDREN per Class)

For Office Use Only

Date received: _____

Staff Initial: _____

Comments: _____

Student Name (Please Print): _____ Chinese Name: _____

Date of Birth: __/__/2016 2015 2014

How did you hear about SWAN? Friend / SWAN Parent / Current SWAN Parent / Other: _____

Is this your child's first immersion experience? Yes ___ / No, I have taken Chinese for _____ Month(s) or

Year at _____

| | |
|---|---|
| Parent/Guardian Information (Please Print) | <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Legal Guardian |
| First Name: _____ | Last Name: _____ |
| Street Address: _____ | Apt.: _____ City: _____ |
| State: _____ Zip Code: _____ | Home Phone: (____) _____ |
| Email: _____ | Mobile Phone: (____) _____ |

Seat is not guaranteed without Registration and Program Fee before the 1st Day of Class

| DATES OF CLASS | MANDARIN CONVERSATIONAL CLASS |
|---|---|
| 1 st Semester 12/5, 12/12, 12/19, 1/02, 1/09, 1/23 & 1/30 2 nd Semester 2/20, 2/27, 3/6, 3/13, 3/20, 3/27, & 4/3 (Registration starts in January, 2021) | <ul style="list-style-type: none"> ○ 1st Semester Tuition Fee _____ \$255 (Includes learning materials). ○ Beginner Level 9:00am (Please mark) – New to Learning Mandarin. ○ Intermediate Level 10:00am (Please mark) – Can identify colors, numbers 1 – 10, simple greetings, and answer in short sentences. |

- **Payment Option:** -Make checks or money orders payable to **SWAN** (Include **student's name** on check). Online Payment (\$1.50 Process Fee), please contact: liana.moy@swan-nyc.org or 646-998-5786.
- **Registration:** In Person/Mail – 90 Bowery, Floor 2, NY, NY 10013. Email: Info@swan-nyc.org.
- **Payment Due Date:** To guarantee seat(s) all fees must be submitted **before the first day of class.**
- **Bounced Check:** \$30 processing fee for each bounced check.

Refund Policy: Sorry, No Refund.

- There is no refund or make up class for illness, absenteeism, and/or vacation.

By signing this form, I understand and agree to the refund policy above

Parent / Guardian Signature: _____ Date: _____

Telephone: 646-998-5786

Email: Info@swan-nyc.org

Website: www.swan-nyc.org