

Autumn Term (26th Aug – 20th Dec 2025)

Registration Form

| Student 1's name: | | Student 2's name: | | | | | | | |
|---------------------------------------|--|--|--|-------|----------------|---|----------------|--|--|
| Early Bird at once Discount! | | | | | | | | | |
| | Register your child by 15 th July to receive 10% off fees! | | | | | | | | |
| | | Enrol 2 children at once (same course & campus only) and get a further 5% | | | | | | | |
| Terms and Conditions | | | | | | | | | |
| * * * * * * * * * * * * * * * * * * * | ONE adult will be admit All adults and children raking photographs or School fees are payable are non-transferrable. Students who successful fyour child misses a sell nace of red & black respond our control, i.e. up class can be made. On completion of applic Please note that course On registration your chiln addition, we reserve concern for the welfare | applications will be accepted on a "first come-first served" basis. Spaces are strictly limited in all classes. NE adult will be admitted to the campus to pick up their child when the student ID card is shown. adults and children must leave the school premises after the class finishes. king photographs or videos is not permitted on the campus. thool fees are payable termly, in advance. No refund will be provided for students withdrawing after a class commences, and fees a non-transferrable. udents who successfully enrolled in a course and withdraw before the course commences will be charged 50% of the course fee. your child misses a session due to sickness or any family reason, there can be no 'make-up' session. case of red & black rainstorm warnings, or typhoon signal 3 or above, or any enforced closure, or any closure due to a situation yond our control, i.e. civil unrest, natural disasters, etc, all classes for that day will be cancelled. In such cases, no refund or make-class can be made. However, if classes are cancelled per EDB or Government guidelines, a refund will be made available. The completion of application to the venue of your choice. We will confirm the place and receipt of payment by email in 1 week. The engistration your child will be placed in the most appropriate class and the head of School's decision is final. The addition, we reserve the right to introduce further rules and regulations as and when required. All these have, as their basis, a neem for the welfare, safety, and development of students, and the efficient operation of the school. Parents are expected to pport the school in their enforcement. | | | | | | | |
| | Programme |) | Time | | Fee | Venue | Please tick | | |
| | Phonics Fur (15 Sessions | | 9:00am – 10:00am | | \$3,000 | Kowloon Tong | | | |
| | S.T.E.A.M. Satur (15 Sessions | • | 10:00am – 12:00noon | | \$6,000 | Kowloon Tong | | | |
| | S.T.E.A.M. Saturdays (15 Sessions) | | 9:00am – 11:00am | | \$6,000 | Whampoa | | | |
| No so | chool: | | | | | | | | |
| | Open Day | | 27 th Sept (Sat) Mic | | lid-term Break | 1st Nov (Sat) | | | |
| ac | ease complete and Imin@anfield.edu.h | k (Kowloo | on Tong Campus) I the payment mo | ethod | | <mark>l.edu.hk</mark> (Whampoa C days. | Campus) | | |
| Student 1's Parent Signature: | | | | | | Date: | | | |

Date: _

Student 2's Parent Signature:



Anfield Language Centre

Students Information

Student 1

| First Name: | Last Name: | | | | |
|-------------------------------|---------------------------------------|--|--|--|--|
| Member ID (Optional): | Chinese Name: | | | | |
| Date of Birth: | Gender: | | | | |
| Address: | | | | | |
| Parent / Guardian 1 | | | | | |
| Relationship: Father / Mother | | | | | |
| First Name: | Last Name: | | | | |
| Email Address: | Phone No.: | | | | |
| Parent / Guardian 2 | | | | | |
| Relationship: Father / Mother | | | | | |
| First Name: | Last Name: | | | | |
| Email Address: | Phone No.: | | | | |
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Student 2

| First Name: | Last Name: | | | | |
|-------------------------------|---------------|--|--|--|--|
| Member ID (Optional): | Chinese Name: | | | | |
| Date of Birth: | Gender: | | | | |
| Address: | | | | | |
| Parent / Guardian 1 | | | | | |
| Relationship: Father / Mother | | | | | |
| First Name: | Last Name: | | | | |
| Email Address: | Phone No.: | | | | |
| Parent / Guardian 2 | | | | | |
| Relationship: Father / Mother | | | | | |
| First Name: | Last Name: | | | | |
| Email Address: | Phone No.: | | | | |
| | | | | | |