



晶晶幼稚園 (屯門校)

JING JING KINDERGARTEN (Tuen Mun Branch)

Tuen Mun Branch : Upper G/F, Shop 5,10,11,13-20,23,24, Common Bond Shopping Arcade, 7 Tsing Chui Path, Tuen Mun Tel: 2457 4666 2457 1572

Hung Shui Kiu Branch: G/F, Lai Hung Garden, No,1, Tan Kwai Tsuen Road, Hung Shui Kiu, Yuen Long.,N.T. Tel.: 2479 6233 2479 6273

International Branch : Shop Nos. 47-54, G/F, Chi Lok Fa Yuen, 18 Tsing Hoi Circuit, Tuen Mun, N.T. Tel.: 2404 5266 2404 5267

Shun Lee Branch: Shop 15A, Level 2, Comm. Premises of Shun Lee Disciplined Services Quarters, 32 Lee On Road, Kowloon Tel: 3409 4481 3409 4491

Enrolment Form

Reg. no. TM

STUDENT	Given Name		Surname			Chinese (If any)			Photo					
	Name:													
	Gender: M / F		D.O.B:	Date	Month	Year	Birth Certificate No. / Passport No. / Other (Please specify)							
	Place of Birth:			Nationality:			Religion:							
	Home Address: _____													
	*Class Applied:		<input type="checkbox"/> A.M.		<input type="checkbox"/> K1		Intended Starting Date:			Date	Month	Year		
			<input type="checkbox"/> P.M.		<input type="checkbox"/> K2									
			<input type="checkbox"/> Whole day		<input type="checkbox"/> K3									
	*Please rank them by order according to your preference from 1 to 3 where "1" is the most preferable choice and "3" is the least preferable choice.													
	LANGUAGES SPOKEN AT HOME: PLEASE STATE FLUENCY.													
1 st :	2 nd :			3 rd :										
Relatives studying at this kindergarten:			Name:		Class :		Relationship :							
Relatives graduated from this kindergarten:			Name :		Graduating year :		Relationship :							
Learn about our school by:		<input type="checkbox"/> Leaflet		<input type="checkbox"/> Introduced by relatives and friends			<input type="checkbox"/> Our website			<input type="checkbox"/> Other website: _____	<input type="checkbox"/> Other: _____			
PARENT		Name		Occupation		Contact no.	Work Place Location:		E-mail address:					
	Father													
	Mother													
	Guardian's/ Caregiver's Name :			Relationship with the student:			Contact no.:							
	Parent/ Guardian's Signature: _____						Date: _____							

REMARKS	Documents Required:										
	i. Completed application form					iii. Four stamped & addressed envelopes					
	ii. Original & copy of the child's Birth Certificate and Immunization Record (original will not be collected)					iv. Two passport sized photos					
Submitting the Application Form:											
i. Submit in hand					v. A non-refundable application fee \$40						
ii. By post (Only post the copy, please paste enough postage fees. Please include a cheque(\$40) payable to Jing Jing Kindergarten(Tuen Mun Branch)).											
iii. By Email (Please e-mail the enrolment form to enrolment.tm@jingjing.edu.hk)											

FOR OFFICIAL USE ONLY		Date	Month	Year	Person in charge	Submission of documents/ fees		/	/		
	Application					<input type="checkbox"/> i <input type="checkbox"/> ii <input type="checkbox"/> iii <input type="checkbox"/> iv <input type="checkbox"/> v			Interviewer		
	Reserved					i) <input type="checkbox"/> RC ii) <input type="checkbox"/> \$ _____			Student's No.		
	Registration								Enrolment class (Half day/ Whole day)		
	Admission								Vice Principal/ Lead teacher sign.		
	Remarks								Principal sign.		