



REGISTRATION FORM – 2011

登记表格

Name : _____ Marital Status : _____

Address : _____

Postal Code : _____

Contact No(s) : _____ (H) _____ (O)

_____ (HP) _____ (email)

(A) I would like to my child / children to attend RAINBOWS. Particulars are as follows :

	<u>Name</u>	<u>Age/Year of Birth</u>	<u>Sex</u>
(1)	_____	_____	_____
(2)	_____	_____	_____
(3)	_____	_____	_____
(4)	_____	_____	_____

(B) Yes, I would like to attend a Support Group

PRISM (in English)

Support Group (in Mandarin)
扶持小组 (华语)

Signature

Date