

International Academy of Arts and Sciences
あすなろ国際学園

サマースクール 2020 申込書 -Summer 2020 Application Form

申し込み日 (Date) 年(Y) 月 (M) 日(D)

ふりがな

幼児名 (Child's Name) _____ 男 (M)・女 (F)

生年月日 (DOB) _____

住所 (Address) _____

電話番号 (Phone) HOME _____ CELL _____

通っている幼稚園名又は学校名 (Currently enrolled school) _____

保護者名 (Parent's Name) _____

勤務先 (Employer) _____

勤務先住所 (Business Address) _____

勤務先電話番号 (Business Phone) _____

緊急連絡先 (Additional Contact in case of an emergency) _____

電話番号 (Phone) _____ E-mail _____

お子様に対するの注意事項、ご要望 (Comments) :

申込期間とコース (Term and Class)

Please put marks on the week(s) and the class that you are registering

- | | | | |
|-----------------------------------|-------------------|-----------------------------------|-------------------|
| <input type="checkbox"/> 1st Week | June 22 – June 26 | <input type="checkbox"/> 2nd Week | June 29– July 2 |
| <input type="checkbox"/> 3rd Week | July 6 – July 10 | <input type="checkbox"/> 4th Week | July 13 – July 17 |
| <input type="checkbox"/> 5th Week | July 20 – July 24 | <input type="checkbox"/> 6th Week | July 27 – July 31 |

Total weeks 合計 週 _____

Need Bus Service

- | | |
|--|---|
| <input type="checkbox"/> With Swimming Full day Class | <input type="checkbox"/> Without Swimming Full day Class |
| PM Language/午後の選択言語 | <input type="checkbox"/> 日本語強化 (Japanese) <input type="checkbox"/> ESL <input type="checkbox"/> bilingual |
| <input type="checkbox"/> With Swimming Morning Class | <input type="checkbox"/> Without Swimming Morning Class |
| <input type="checkbox"/> Afternoon Language Class Only | |
| <input type="checkbox"/> 日本語強化 (Japanese) | <input type="checkbox"/> ESL |

Please send this form to the school with a check by June 1st.

We will send you a calendar and any other documents that need to be filled out.

Under no circumstances, can any fee be refunded after your payment is received.

(Please make checks payable to: IAAS)

Send to : International Academy of Arts and Sciences 300 High St. Closter, NJ 07624