



Shu Ren International School

Winter 2009 Adult Mandarin Class (Jan 5 – Mar 27)

www.ShuRenInternationalSchool.com

1333 University Avenue, Berkeley, CA 94702

Phone: (510) 981-0320 and (510) 981-0291

Registration Form

First Name: _____ Last Name: _____

Mailing Address: _____

Phone number (daytime): _____ Mobile _____

How did you hear about this class? _____

Please read and initial the following statements:

___ A minimal number of students are required for a class to start. You will be notified by phone if the class is cancelled.

___ I understand that there will not be any refund once the class has begun.

___ I understand that I need to pay the following in full in order to reserve a space in the class:

Registration Fee:	\$10
Tuition (3 months):	\$540
Total:	\$550

Please mail the Registration Form and a check of \$550 to Shu Ren International School before January 5, 2009.

Signature _____ Date _____