



**Toronto
Japanese
Language
School**

**Registration Form
CHILD / STUDENT**

Please make all checks payable to:
Toronto Japanese Language School

Please **print clearly**
and **answer all questions.**

For Administrative Use Only		
<input type="checkbox"/> New	<input type="checkbox"/> Child	Level _____
<input type="checkbox"/> Returning	<input type="checkbox"/> Student	
<input type="checkbox"/> Family		
Adult: _____		
Siblings: _____		
Deposit: _____	Receipt#: _____	<input type="checkbox"/> Cash
\$ _____	Date: _____	<input type="checkbox"/> Cheque
Balance: \$ _____	Receipt#: _____	<input type="checkbox"/> Cash
Total Early Tution = \$ _____	Date: _____	<input type="checkbox"/> Cheque
Tuition: _____	Receipt#: _____	<input type="checkbox"/> Cash
\$ _____	Date: _____	<input type="checkbox"/> Cheque
Notes: _____		

<input type="checkbox"/> Boy	Given Name	Initial	Family Name
<input type="checkbox"/> Girl			
Grade in Regular School		Date of Birth (Month / Day / Year)	
Name of Parent / Guardian			
Address		Apt No.	
City		Postal Code	
Home Phone Number	Business Phone Number	e-mail	

For Returning Child / Student

What year were you last enrolled at TJLS? Last year Year before Other _____

What was his / her last level? Japanese as a Heritage Language / Foreign Language
 Level 1 Level 2 Level 3

Who was his / her Sensei (Teacher)? _____

For New Child / Student

Where did you learn about the Toronto Japanese Language School?
 Nikkei Voice Brochure / poster Website Personal contact
 JCCC Newsletter Other: _____

If your son/daughter has previous knowledge of Japanese, please answer the following questions:
 How many years has he/she been studying Japanese? < 1 year 1-3 years > 3 years
 How is his/her Japanese language skill? Beginner Intermediate Advanced
 Can he/she read and write HIRAGANA and KATAKANA? Yes No
 How many KANJI characters can he/she recognize? < 250 250-500 > 500

I give permission for photographs taken during the school year of myself (or my son/daughter) to be used for TJLS promotional purposes. : Yes / No

Guardian's name (printed): _____

(**yyyy / mm / dd**)

Guardian's signature: _____

Date: _____ / _____ / _____