

Kinmon Gakuen/Golden Gate Institute

2031 Bush St. S.F., CA 94115

E-mail: kinmons@hotmai.com Web: kinmongakuen.org

Registration Form for In-person Class Aug, 24, 2024 – May 17, 2025

Register for Fall 2024 and Spring 2025

Time: Saturday, 9:00 am – 12:00 am

Registration Fee \$50 Fall Tuition: \$450 Spring Tuition \$450

Please choose class: The class may change depending on the number of the students enrolled.

Beginning 1 Beginning 2 Intermediate Pre-Advanced Advanced

Student's Name _____
Last First Middle

Student's Name in Japanese _____

MALE FEMALE Date of Birth _____ / _____ / _____ Age _____ (as of August 24th, 2024)
mm dd yyyy

Mother's Name _____ Father's Name _____

Address _____ City _____

State _____ Zip _____

Home Phone _____ Cell Phone _____

E-mail _____ (g-mail preferred)

Contact E-mail (If different from above) _____

Emergency Contact:

1. Name _____ Phone _____

Student's Background:

1. What is the primary language at home?

English Japanese Chinese French Spanish Other()

2. Whose idea is it to attend a Japanese language school?

Parents' Student's

3. Is this his/her first time attending a Japanese language school?

Yes No If no, where has he/she attended before? _____

Comments and Expectation from Parents:

Signature

Date

Please mail this form and payment check to

Please make the check payable for Golden Gate Institute or Kinmon Gakuen

Due Date: The payment must be received by Monday August 19th

**Kinmon Gakuen
2031 Bush St
San Francisco
CA 94115**

No Refund

2024 年度(2024 年秋～2025 年春) 登録用紙

The School Year of 2024 (Fall 2024 ~Spring 2025) Registration Slip

生徒名/Student Name :

1 _____ (\$50)

2 _____ (\$50)

3 _____ (\$50)

合計額/Total Amount : \$ _____

授業料/ Tuition \$450 (per semester)

please

First half

Full payment

生徒名/Student Name :

1 _____ HALF/ FULL (\$450)(\$900)

2.(Sibling) _____ (\$420) (\$840)

3.(Sibling) _____ (\$420) (\$840)

合計額/Total Amount : \$ _____

ご署名/Signature : _____

日付/Date : _____