

# Little Sun Mandarin Centre

## Enrolment Form

Name of Student: (Chi) \_\_\_\_\_ (Eng)

Date of Birth: (MM) \_\_\_\_\_ (DD) \_\_\_\_\_ (YY) \_\_\_\_\_ Sex:

Tel: (Home) \_\_\_\_\_ (Office) \_\_\_\_\_ (Mobile)

Fax: \_\_\_\_\_ Email:

Address:

Contact Person: \_\_\_\_\_ Relationship:

Course Title	Day	Time	Period	Fee

### Payment Method

Cash

Cheque No. \_\_\_\_\_ Bank:

Please make cheque payable to Little Sun Mandarin Centre and return this form with payment to our centre.

Room 1403 Queen's Center, 58-64 Queen's Road East, Wanchai HK

Tel: 2123 2109 Email: [info@littlesunmc.com](mailto:info@littlesunmc.com) website: littlesunmc.com