Registration Form

Class: Chinese Language Beginner Class

Name: _____ (Print)

Address: _____
Street City Zip Code

Contact number: (H) _____ (O/C) _____

Email address: _____

- **Confirmation will be sent out one week before the class starts.**
- **For more information please contact the Chinese Community Center:248.585.9434**

For Office Use
Check amount: $ _____
Check number: _____