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| **Enrolment Form** | |
| Please Email to: [jim.chen@teg.ac.nz](mailto:jim.chen@teg.ac.nz)  Contact Person: Jim Chen  Phone: 021-028-72703  Enrolment due date: 08/11/2020 | |
| Name |  |
| School |  |
| Day of birth |  |
| Gender |  |
| Email |  |
| Emergency contact person and phone number |  |
| Allergies |  |
| Medical conditions |  |
| Insurance policy |  |