



REGISTRATION CLOSING DATE / 截止日期: 31/12/2026			
COURSE COMMENCING DATE / 开学日期: 17/1/2027			
☐	Lower Level 小班 (P1 & P2)	☐	Middle Level 中班 (P3 & P4)
☐	Upper Level 大班 (P5 & P6)	☐	Secondary 少年班 (Sec.1 to Sec.5)
CHILD'S PARTICULARS (As At Year 2027) 孩子的资料 (依据 2027 年)			
Name **		姓名**	
Gender 性别** ☐ Male / 男 ☐ Female / 女		Date of Birth 出生日期**	
School Name** 学校名称		Age** 年龄	Grade** 班级
Have you taken the 3 Refuge? 你受过三皈依吗?		☐ Yes / 有 ☐ No / 否	
		Dharma Name 归依法名	
PARENT/GUARDIAN'S PARTICULARS 家长/监护人资料			
Name **		姓名**	
Gender 性别** ☐ M /男 ☐ F / 女		Relationship with Child 与孩子的关系**	
HP No. ** 手提电话	Off No. 办公室电话	Home No. 住家电话	
Email Add 电邮			
Have you taken the 3 Refuge? 你受过三皈依吗?		☐ Yes / 有 ☐ No / 否	
Are you a volunteer of our Society? 您是本会护法?		☐ Yes / 是 ☐ No / 不是	
		☐ Non-member 非会员 ☐ Membership no. 会员号码: _____	
		Attended courses conducted by our Society? 您上过海印主办的课程吗? ☐ Yes / 有 ☐ No / 否	
Member of Sagaramudra Buddhist Society may choose not to fill in the below information 本会会员可选择填写以下资料			
Educational Standard 教育程度		Occupation 职业	
Home Address** 住址			
Please note 请注意: 1. Enrolment is confirmed only after payment is received and it is non transferable. Fee paid is not refundable, unless the class is canceled by the Society. 报名付费后确定名额。名额一旦确定不得转让。所付款项恕不退还, 除非本会取消课程。 2. Sagaramudra Buddhist Society reserves the right to cancel any classes due to unforeseen circumstances. 海印学佛会有在不得已的情况下取消课程的权力。 3. The society may make use of photographs & videos of students in society publications, website, social media channels and other official communication channels. 本学会可能征用学生的照片或录相于学会刊物、网页及其它通讯媒介。 4. By submitting this form, I consent to the collection, use, and disclosure of my personal data by Sagaramudra Buddhist Society. Please refer to www.sagaramudra.org.sg/privacy for details. 通过提交此表格, 我同意海印学佛会收集、使用和披露我的个人数据。请参阅 www.sagaramudra.org.sg/privacy 了解详情。			
Payment Method / 付款方式 : 1. For cash/NETS payment, kindly visit the society. 若以现金/NETS付款, 则请亲临本会。 2. PayNow (UEN : S88S0090C). Please Email or WhatsApp your Full Name, Contact Number and transaction reference to us. 请将您的姓名、联络电话及转账交易记录发电邮或WhatsApp给我们。 (Email: enquiries@sagaramudra.org.sg / WhatsApp 91732249)			
I declare that the above personal particulars are correct. 兹证明以上我所提供的资料正确无误。			
Date / 日期		Signature / 签名**	
For Official Use / 本会专用			
Registration / fee collected by:		Receipt No.:	Amount: