

For that peace of mind only a parent can know...

Passport Photo

**Child's Information**

Child's name: \_\_\_\_\_ Gender: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Nationality: \_\_\_\_\_ Languages Spoken: \_\_\_\_\_

Address: \_\_\_\_\_

Home Tel. \_\_\_\_\_

Has your child attended nursery before? If yes, which one

Parent Information	Father	Mother
Name		
Nationality		
Work Place		
Mobile Tel. No.		
Email		
Emergency contact person (other than parents)		

Details of Siblings: Names and Ages. Do any of the children attend school? If yes which school?

**PLEASE CHECK THE DAYS YOUR CHILD WILL BE ATTENDING:**

Days/ week:                    3                    4                    5                    Days:    M            T            W            TH            F

Time:                     (8am-12:30pm)     (8am -3pm)     (8am -5pm)

Transportation:            Yes \_\_\_ No \_\_\_ Area \_\_\_\_\_ (attach transportation request)

Starting Date: \_\_\_\_\_

\_\_\_\_\_  
Mother's Signature / Date

\_\_\_\_\_  
Father's Signature/ Date

\*Registration Fees is Non-Refundable.