

## Child Information

First Name \_\_\_\_\_ Family Name \_\_\_\_\_

Date of Birth (DD/MM/YY) \_\_\_\_\_ Age \_\_\_\_\_ Gender  Male  Female

Nationality/Passport \_\_\_\_\_ Religion \_\_\_\_\_

First Language \_\_\_\_\_ Other Language(s) \_\_\_\_\_

Has Child attended nursery before?  Yes  No Nursery Name: \_\_\_\_\_

Reason for leaving the nursery (Please attach a previous nursery report if possible) \_\_\_\_\_

Has your child received therapy before?  Yes  No \_\_\_\_\_

## Family Information

Father's Name \_\_\_\_\_ Nationality \_\_\_\_\_

Profession \_\_\_\_\_ Languages(s) \_\_\_\_\_

Mother's Name \_\_\_\_\_ Nationality \_\_\_\_\_

Profession \_\_\_\_\_ Languages(s) \_\_\_\_\_

### Brother's and/or sisters' names and date of birth

Name \_\_\_\_\_ Date of Birth (DD/MM/YY) \_\_\_\_\_

Name \_\_\_\_\_ Date of Birth (DD/MM/YY) \_\_\_\_\_

Which Schools do Siblings attend? \_\_\_\_\_

## Contact Information

Home Address \_\_\_\_\_ Building/Villa/Apartment \_\_\_\_\_

P. O. Box \_\_\_\_\_ Area \_\_\_\_\_

### Telephones Numbers

Mother Home \_\_\_\_\_ Office \_\_\_\_\_ Mobile \_\_\_\_\_ Email \_\_\_\_\_

Father Home \_\_\_\_\_ Office \_\_\_\_\_ Mobile \_\_\_\_\_ Email \_\_\_\_\_

### Emergency Contact

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Home Tel. \_\_\_\_\_ Mobile \_\_\_\_\_

### Password

Parents to provide a unique code for identification purpose \_\_\_\_\_

**Authorised persons to collect child from Nursery (other than parents as listed overleaf)**

1st Person Name \_\_\_\_\_ Relation/Gender \_\_\_\_\_

1st Person Name \_\_\_\_\_ Relation/Gender \_\_\_\_\_

1st Person Name \_\_\_\_\_ Relation/Gender \_\_\_\_\_

**Enrolment Preferences (please circle)**

1. Academic term or All year      8am-1pm      8am-3pm      8am-5pm      8am-6pm      Other

2. Name of Class \_\_\_\_\_ Start date \_\_\_\_\_

3. Circle days      Sunday      Monday      Tuesday      Wednesday      Thursday

4. Skillplay \_\_\_\_\_ Summer Camp \_\_\_\_\_ 7.30am Breakfast Express \_\_\_\_\_

Please make notes regarding preferences and Camps/Skillplay (ie. no. weeks enrolled/times etc.):

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**Registration checklist/agreement to terms and conditions**

**Please attach 1 colpy of the following**

- Child's Passport & Visa and Fathers Passport and Visa
- Child's Birth Certificate
- IDEA Medical Questionnaire and Child's Immunization Records
- Colour Passport size Photo of Child and 4x6 photo of child to be used for smartbook
- Registration, Medical and Deposit Fees are due on enrolment

We take video and photographs of our children for the Smartbook, brochures, website and social media community applications etc. We notify parents of special events, closures, illness and various nursery information via email/newsletter. Please advise in writing if you do not want this done and decline to share your information with other nursery parents. We reserve the right to limit enrolment and spaces at our discretion, which is subject to change without notice.

By signing below, you are thereby agreeing/accepting IDEA Early Learning Center Terms and Conditions in full and will be bound by them as they stand.

Date \_\_\_\_\_ Signature of Parent/Guardian \_\_\_\_\_

**For Official use only**

Date received \_\_\_\_\_ Signature \_\_\_\_\_ Follow up \_\_\_\_\_