



# THE CHILDREN'S HOUSE

## MONTESSORI KINDERGARTEN

### 2020-2021 REGISTRATION FORM

#### Details of Child

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

CPR No \_\_\_\_\_ Date of birth \_\_\_\_\_

Nationality \_\_\_\_\_ Gender (please tick) Male  Female

Religion \_\_\_\_\_

Address: House No \_\_\_\_\_ Road No \_\_\_\_\_ Block No \_\_\_\_\_ Town \_\_\_\_\_

P.O. Box \_\_\_\_\_ Desired date of admission \_\_\_\_\_

Number of siblings / ages \_\_\_\_\_

Has your child attended any other nursery? Yes  No

Mother's Details		Father's Details	
Title (Mrs, Dr, Sheikha etc)		Title (Mr, Dr, Sheikha etc)	
First Name		First Name	
Family Name		Family Name	
CPR or passport		CPR or passport	
Nationality /Language		Nationality /Language	
Occupation		Occupation	
Employers Name		Employers Name	
Mother's Mobile Number		Father's Mobile Number	
Email Address		Email Address	

## Emergency Contact

Please nominate a person to contact in the event of both parents **not** being available:

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Contact Number \_\_\_\_\_

Does your child have any known illnesses or allergies? Yes  No

If yes please specify:

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In case of an emergency and neither parent can be reached, does the school have your permission to take your child to hospital?

Yes  No

Which vaccinations has your child received? Please provide a copy of his / her vaccination details or fill in the space below.

Vaccine	Date

Is there any further information regarding your child that you would like us to be aware of? If yes, please enter relevant information below:

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Who will be collecting your child from school?

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Name	Phone Number
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**If someone else will be collecting your child, for his /her safety it is VERY IMPORTANT THAT YOU PLEASE NOTIFY THE SCHOOL BEFORE HAND.**

For the schools own information, we would like to ask you some questions (which of course you are not obliged to answer):

1. How did you first hear about the Montessori Method?

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2. Why did you choose The Children's House for your child?

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3. Which school will your child go to when he/she leaves The Children's House?

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## PAYMENT TERMS AND CONDITIONS

1. Fees are to be paid TERMLY in advance and will not be refunded for any reason once the term has begun.
2. A non-refundable registration fee of 50BD is required to guarantee your child's place at The Children's House.
3. The academic year runs from September to June and includes the Winter Break, Spring Break as well as all public holidays. In exceptional circumstances extra days may also be given at the discretion of the School's Director.
4. There are three payments to be made prior to the beginning of each term:

Term One – September to December

Term Two – January to March

Term Three – April to June

### Declaration

I understand and accept the above terms and conditions of payment.

\_\_\_\_\_  
Parents Name

\_\_\_\_\_  
Parents Signature

\_\_\_\_\_  
Date

When submitting your application form, please provide the following items:

- Copy of child's CPR or passport
- Copy of Father's CPR or passport
- Copy of the child's vaccination record
- 2 passport-sized photographs of the child