



First Steps @ KIS Registration Form

Tuesday and Thursday 10.30am - 12.30pm



Application for: Full Term Please tick as appropriate

TO BE COMPLETED BY APPLICANT (please print)

FATHER'S NAME _____ **MOTHER'S NAME** _____
 Father's Nationality _____ Mother's Nationality _____
 Father's Tel Contact _____ Mother's Tel Contact _____
 E-mail contact _____
 Address _____

Accompanying Responsible Adult (If different from above)

Name _____ Nationality _____
 Tel Contact _____ Language (s) spoken _____
 Relationship to child _____

NAME OF CHILD _____ Sex _____
 Date of Birth _____ Age _____
 Place of Birth _____
(Please attach a copy of child's birth certificate or passport)
 Nationality _____
 Languages (s) spoken _____
 Language (s) spoken at home _____
 Details of any Medical or Physical Conditions (including food allergies)



(Please attach full details separately)

(please tick ✓ if you agree) **I give permission** for photographs of my child to be taken and used in school publications, including the KIS newsletter and KIS Year book

INDEMNIFICATION I understand and hereby note that my child WILL NOT be covered for PA insurance if he/she starts playgroup on the day of registration

PARENT'S SIGNATURE _____ DATE _____

OFFICE USE ONLY

PA Insurance RM 20 PAID Term Fee RM _____ PAID Receipt No: _____

Notes