

# ADMISSION FORM

CHILD'S NAME: \_\_\_\_\_  
[Last] [First] [Middle]

NICKNAME: \_\_\_\_\_

NATIONALITY: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ AGE: \_\_\_\_\_ SEX: M  F   
[Month/Day/Year]

Attach Photo  
Here

FATHER'S NAME: \_\_\_\_\_ TEL: \_\_\_\_\_

MOTHER'S NAME: \_\_\_\_\_ TEL: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

MOBILE PHONE: \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_

HAS YOUR CHILD RECEIVED ASSISTANCE FOR ANY LEARNING OR BEHAVIORAL DIFFICULTIES?

NO  YES  If Yes, attach details: \_\_\_\_\_

Failure to disclose information about learning and/or behavioral difficulties may result in enrollment being rescinded.

AS A PARENT, HOW WOULD YOU LIKE TO BE INVOLVED IN THE SCHOOL?

Board member  Parent / Teacher Association Member  Other: \_\_\_\_\_

SIBLINGS? Name[s], age[s] and schools attended: \_\_\_\_\_

NOTE: Fees and tuition are payable in advance. Registration fees are not refundable.  
Parents agree to follow guidelines set by the ECLC



\_\_\_\_\_  
Signature [s] of Parent [s]:

\_\_\_\_\_  
Date