| Application for Dive INTO ENGLISH-Beginnerwednesday’s 13:30-15:00 Please type or print clearly in block capitals | | | |
| --- | --- | --- | --- |
| Student Information | | | |
| Last Name: | First Name: | | Date of Birth: |
| Sex *(please check the correct box)*:  Male  Female | | | |
| Mother Tongue *(first language) :* | | | |
| Date Joining: | | | |
| Does your child have allergies:  Yes  No if yes, please specify: | | | |
| Does your child take regular medication:  Yes  No if yes, please specify: | | | |
| Family Information | | | |
| **Father** | | | |
| Last Name: | First Name: | | Nationality: |
| Home Phone Number: | Mobile Number: | | Email: |
| Address: | | | |
| **Mother** | | | |
| Last Name: | First Name: | | Nationality: |
| Home Phone Number: | Mobile Number: | | Email: |
| Address: | | | |
| Name of Accident Insurance Company: Policy Number: | | | |
| Emergency Contacts | | | |
| Last Name: | | First Name: | |
| Address: | | | |
| Home Phone Number: | Mobile Number: | | Email: |
| Relationship: | | | |
| **Fees** | | | |
| Fees: 50.00 CHF one time, non-refundable registration fee per child will be invoiced once we receive the admission form  450CHF Term 1 (Aug-Dec) 390CHF Term 2 (Jan-March) 270CHF Term 3 (April-June)  Term 1 Due by: August 15th Term 2 Due by: December 15th Term 3 Due by: March 15th | | | |
| Payment Schedule:  Termly  Yearly | | | |
| Invoice  by mail  by email email address: | | | |
|  | | | |
| How did you hear about our school? | | | |
| via web search  recommendation  relocation agency  other: | | | |
| **Withdrawal** | | | |
| In order to withdraw your child, a 3 months’ written notice has to be provided | | | |
| Signature | | | |
| Signature: | | | Date: |