



www.kidsnkrayons.com

An ISO 9001-2008 CERTIFIED PLAY SCHOOL

Stellar Tower Bungalow No:1, Unit-A , 2nd Cross Lane, Lokhandwala complex, Andheri (W), Mumbai 400053. Phone: 2635 8684/81

Please paste a cute recent passport size photo of your little one

REGISTRATION FORM

(to be filled by Parent / Guardian of child)

Please read the form carefully before filling it. (Fill the form in Block Letters)

Child's last name	First Name	Middle Name	
Date of Birth Day Month Year / /	SEEKING ADMISSION FOR: JUNE 20..... / DECEMBER 20..... <input type="checkbox"/> Play school <input type="checkbox"/> Nursery Age in June/December:..... YrsMonths		
ADMISSION FOR Play Group / Nursery		TIME SLOT / BATCH SELECTED 9.00 a.m. to 11 a.m / 12 noon to 2 p.m	
Current Residential Address:		Gender <input type="checkbox"/> Boy <input type="checkbox"/> Girl	Blood Group
		Nationality	
City:	Pin:	Tel:	
Name of pervious school/present school:			
Address of School:			
Any special learning needs (Please state in detail. This information will help us in assisting your child):			
A LITTLE ABOUT YOUR CHILD			
Allergies if any:			
Foods to be avoided:			
Medications to be avoided:			
Any pet name used at home:			
Languages spoken at home:			
Any special learning needs			
FAMILY INFORMATION			
Mother's Name:	Qualification <input type="checkbox"/> Graduate <input type="checkbox"/> Post Graduate <input type="checkbox"/> Others		
Occupation: <input type="checkbox"/> Self Employed <input type="checkbox"/> Services <input type="checkbox"/> Home Maker <input type="checkbox"/> Professional <input type="checkbox"/> Others	Address:		

Father's Name:	Qualification <input type="checkbox"/> Graduate <input type="checkbox"/> Post Graduate <input type="checkbox"/> Others
Address:	Occupation: <input type="checkbox"/> Self Employed <input type="checkbox"/> Services <input type="checkbox"/> Home Maker <input type="checkbox"/> Professional <input type="checkbox"/> Others

Contact details: Tel: _____
 Mobile: _____ Email: _____

Guardian's Name (if applicable):	Relation to child:
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Contact details: Tel: _____
 Mobile: _____ Email: _____

Are parents Divorced ? <input type="checkbox"/> Yes <input type="checkbox"/> No	Who has the custody of the Child ? <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> N A
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Sibling Information: My Elder Son Daughter Cousin Friend is currently enrolled/was enrolled at Kids`N`Krayons
 Yes No Class: Year:

Family Physician Name:
 Telephone No:

REFUND POLICY
Fees once paid are not refundable nor transferable under any circumstances.

FIELD TRIPS POLICY

Field Trips are an important component of learning outside the classroom. Children learn better when they are provided with a hands on experience. Planned field trips are an extension of concepts explored in the classroom. Field trips are carefully planned, reviewed and monitored by our staff to ensure the safety of our children. The school shall take the best possible care for individual children in our care during the field trips.

DECLARATIONS

I agree to my child's photograph appearing in any kind of Kids 'N' Krayons brochures or publications.
 The undersigned clarifies that the following are acceptable to him/her:
 1. The fee charged are not refundable or transferable.
 2. The decision of the management shall be final.
 The undersigned certifies that each part of the application and the information inserted herein has been carefully read, is true and correct and I have not withheld any important information. I undertake to abide by all the terms and conditions. I hereby agree that I am leaving my child under the able care of the staff of Kids 'N'Krayons and I will not hold them responsible for any unavoidable mishaps or accidents.

Name:
 Signed : Date:.....

Checklist of documents to be submitted along with the application for admission

Sr.No	Particulars	Yes	No	N A	Remarks
1.	4 Passport Size photograph	Yes	No	N A	
2.	Copy of Birth Certificate	Yes	No	N A	
3.	Copy of School Leaving Certificate	Yes	No	N A	
4.	Copy of Report Card of Previous School	Yes	No	N A	
5.	Copy of Transfer Certificate	Yes	No	N A	
6.	Copy of Passport and Visa (in case of foreign student)	Yes	No	N A	

Form processed by: Principal:

Remarks:

FOR OFFICE USE ONLY

Half yearly fees / Annual / Fees / Library Fees / Registration Fees
 Total Amount Received in June: Balance:

Half yearly fees / Annual Fees / Library Fees / Registration Fees
 Total Amount Received in Decemeber: Balance:

Payment Mode: Cash / Cheque in favour of "Kids`N`Krayons"