

| APPLICATION FORM | | | | |
|---|---------------------------|---|---------------------------|--|
| CHILD INFORMATION | | | | |
| Childs Name: (As on Passport) | | | | |
| Date of Birth: | Male/Female: | | Nationality: | |
| Home address: | | | | |
| Religion: | 1 st Language: | | 2 nd Language: | |
| Previous Nursery Y / N: | Name of Nursery: | | Dates Attended: | |
| | PARENT / GUARI | DIAN INFORM | ATION | |
| Father's Name: (As on passport) | | Mother's Name: (As on Passport) | | |
| Nationality: | | Nationality: | | |
| Mobile No: | | Mobile No: | | |
| Email: | | Email: | | |
| Job Title: | | Job Title: | | |
| Employer: | | Employer: | | |
| EMERGENCY CONTACT | | | | |
| Name: | Mobile No: | | Relationship to child: | |
| ENROLMENT PREFERENCES | | | | |
| TERM 1 (Sept-Dec): | TERM 2 (Jan-Mar): |] | TERM 3 (Apr-Jun): | |
| | | Please select | your preferred days: | |
| 3 Days per week: [(Baby, Toddlerr & Pre-School) 5 Days per week: [| | MON: TUE: WED: | THURS: □ FRI: □ | |
| | | Note: Children must only attend on the days selected if registered for 3 days. Days missed due to illness/vacation cannot be made up during the course of the week. | | |
| EXTENDED CARE OPTIONS: | | 1 | | |
| 2 PM – 4 PM: 2 PM – 6 PM (option subject to confirmation) | | | | |
| MEDIA CONSENT | | | | |
| I understand that Amity ELC may photograph and/or film my child in a positive light during his/her education at AELC and prior consent will be sought. I understand that these media files may be used for AELC online and printed publications and advertisements, including Facebook, Twitter and other social media outlets as well as the AELC website and that these files are the property of Amity ELC. Yes, I hereby give permission to use my child's photographs for the above mentioned purposes. | | | | |
| No, I do not give permission to use my child's photographs for the above mentioned purposes. | | | | |
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| HEALTH AND MEDICAL INFORMATION | | | | |
| Parents must disclose any factor that may affect the child's ability to cope independently within the mainstream school environment. Failure to disclose any learning difficulties or medical conditions at the time of application may result in the school placement being withdrawn. | | | | |



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|--|--|--|--|--|
| Does your child have any allergies: | Is your child taking any medication: | Does your child have any health/medical conditions that | | |
| YES: NO: | YES: NO: | may impact his/her activities at AELC? Please provide details. | | |
| If yes, please provide details: | If yes, please provide details: | YES: NO: | | |
| Does your child have any developmental delays that you are aware of? YES: NO: If yes, please provide details: | Has your child encountered any difficulties at his/her previous nursery (if applicable)? YES: NO: If yes, please provide details: | Are there any family circumstances and/or health related issues that may be important for us to know about? YES: NO: If yes, please provide details: | | |
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| | TERMS & CONDITIONS | Madiant Face FOO AFD | | |
| Registration Fee: 1000 AED Non-refundable | Security Fee: 1000 AED Non-Refundable – offset against ten | Medical Fee: 500 AED Non-refundable fee payable annually | | |
| TUITION FEES: Tuition fees are divided into 3 installments du MODE OF PAYMENT: Payment can be made by cash/cheque/credit payments please ensure the payment is made Children will not be added to class lists or received 24 hours prior to the child joini AELC reserves the right to withhold end AELC reserves the right to refuse re-adm Withdrawal Policy: If the student attends school for two we If the student attends for more than a more content of the student attends for more content of the student attends for more than a more content of the student attends for more cont | Security Fee: 1000 AED Non-Refundable – offset against ten ring an academic year and are due 15 of card (UAE Dirham only) during school was e out to: 'Amity Early Learning Cente or allowed to enter the class until for ing their respective class. Please re of year progress reports until full so nission unless all outstanding balance eks or less, a month's fees will be deducted d ranging between two weeks and one month onth, three months' fees will be deducted | Mon-refundable fee payable annually days prior to the start of each term. working hours, Monday to Friday 8am-2pm. For cheque er LLC' ees have been settled in full. Fees must be fer to our fee policy for further details. Settlement of all outstanding balances. Inces have been settled. | | |
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