

REGISTRATION FORM

CHILD INFORMATION

Name:		
Date of Birth:	Male/Female:	Nationality:
Home address:		
Religion:	1 st Language:	2 nd Language:
Previous Nursery Y / N:	Dates Attended:	Name of Nursery:

PARENT / GUARDIAN INFORMATION

Father's Name:	Mother's Name:
Nationality:	Nationality:
Mobile No:	Mobile No:
Email:	Email:
Job Title:	Job Title:
Employer:	Employer:

EMERGENCY CONTACT

Name:	Mobile No:	Relationship to child:
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ENROLMENT PREFERENCES

TERM 1 (Sept-Dec): <input type="checkbox"/>	TERM 2 (Jan-Mar): <input type="checkbox"/>	TERM 3 (Apr-Jun): <input type="checkbox"/>
<p>3 Days per week: <input type="checkbox"/> <i>(Baby, Toddler, Pre-School & FS1)</i></p> <p>5 Days per week: <input type="checkbox"/></p>	<p>Please select your preferred days:</p> <p>SUN: <input type="checkbox"/> WED: <input type="checkbox"/> MON: <input type="checkbox"/> THURS: <input type="checkbox"/> TUE: <input type="checkbox"/></p> <p>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.</p>	

EXTENDED CARE OPTIONS:

7 AM – 8 AM: 2 PM – 5PM: 2 PM – 6 PM:

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.

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any learning difficulties or medical conditions at the time of application may result in the school placement being withdrawn.

REGISTRATION FORM

<p>Does your child have any allergies:</p> <p>YES: <input type="checkbox"/> NO: <input type="checkbox"/></p> <p>If yes, please provide details:</p>	<p>Is your child taking any medication:</p> <p>YES: <input type="checkbox"/> NO: <input type="checkbox"/></p> <p>If yes, please provide details:</p>	<p>Does your child have any health/medical conditions that may impact his/her activities at AELC? Please provide details.</p> <p>YES: <input type="checkbox"/> NO: <input type="checkbox"/></p>
<p>Does your child have any developmental delays that you are aware of?</p> <p>YES: <input type="checkbox"/> NO: <input type="checkbox"/></p> <p>If yes, please provide details:</p>	<p>Has your child encountered any difficulties at his/her previous nursery (if applicable)?</p> <p>YES: <input type="checkbox"/> NO: <input type="checkbox"/></p> <p>If yes, please provide details:</p>	<p>Are there any family circumstances and/or health related issues that may be important for us to know about?</p> <p>YES: <input type="checkbox"/> NO: <input type="checkbox"/></p> <p>If yes, please provide details:</p>

TERMS & CONDITIONS

<p>Application Fee: 1000 AED <i>Non-refundable payment on submission of application</i></p>	<p>Security Deposit: 1000 AED <i>Refundable subject to 1 month prior notice of withdrawal (in writing)</i></p>	<p>Medical Fee: 500 AED <i>Non-refundable fee payable annually</i></p>
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TUITION FEES:

Tuition fees are divided into 3 installments during an academic year and are due 15 days prior to the start of each term.

MODE OF PAYMENT:

Payment can be made by cash/cheque/credit card (UAE Dirham only) during school working hours, Sun-Thurs 8am-2pm. For cheque payments please ensure the payment is made out to: **'Amity Early Learning Center LLC'**

Children will not be added to class lists or allowed to enter the class until fees have been settled in full. Fees must be received 24 hours prior to the child joining their respective class. Please refer to our fee policy for further details.

AELC reserves the right to withhold end of year progress reports until full settlement of all outstanding balances.

AELC reserves the right to refuse re-admission unless all outstanding balances have been settled.

Withdrawal Policy – Commencing AY 2018/ 2019:

- If the student attends school for two weeks or less, a month's fees will be deducted
- If the student attends school for a period ranging between two weeks and one month, two months fees will be deducted
- If the student attends for more than a month, three months' fees will be deducted
- The above cycle will restart at the end of every 3 months (from start date) or with the beginning of a new term.

DECLARATION

I/We have read and confirmed that all the information contained in this admissions application is true and accurate and agree that in the event information provided is incomplete, incorrect or inaccurate, AELC reserves the right to take any necessary action including cancellation of admission. AELC reserves the right to place our child in the level deemed most appropriate based upon age cut-off dates. I/We agree to fully abide by all of the school's policies in support of our child's wellbeing and his/her registration status, including tuition fee payments as and when due. I/We agree to undertake and keep AELC updated of any changes in the information related to our child or to ourselves at all times.

Parent/Guardian Name:	Date:
Signature:	Date: