



AFTERCARE APPLICATION FORM

Name of Child:
Surname First Names

Date of Birth: Sex:

Home Address:
.....

Telephone Home: Cell:

Father's Name and Title:

Occupation: Telephone Business:

Business Address:

Mother's Name and Title:

Occupation: Telephone Business:

Business Address:

Alternative Contact: Telephone:
(In case of emergency)

Doctor: Telephone:

Any important information : Allergies, chronic illnesses, other problems we should be aware of?
.....

I, the undersigned, hereby apply for the admission of the above mentioned pre-schooler and accept the conditions, rules and regulations of this aftercare facility. I have read the conditions and regulations and accept them unconditionally.

My child will be fetched from the aftercare by:

Times during which my child will be at the After Care Centre:

12:00 - OR

Signed:
(Father, Mother or Guardian)