

Winter School 2019-2020 Registration Form

My child will attend the following weeks.
I understand Winter School fees are non-refundable.

Week 1
6-10 January
\$75

Week 2
13-17 January
\$75



1. Full name of student:
Family Name First Name Middle Initial

2. Date of birth: 3. Age: 4. Gender: F M

5. Is your child a current or past student at Gecko Garden Preschool? Yes No
If no, have they previously attended another preschool or daycare? Yes No

Name of preschool or daycare:

6. Nationality(ies):

7. Language(s):

8. Please list any allergies or health conditions which affect your child:

9. Is your child on any medication? Yes No

If yes, please list and state illness:

10. Parent / guardian name:

Phone number: Email:

11. Emergency contact name:

Phone number: Email:

Please read and sign below:

In the event of an accident or emergency, I hereby acknowledge that Gecko Garden Preschool shall not be liable for any injuries incurred. In case of a life-threatening situation, children will be taken to the closest, most suitable hospital. At the same time, parents will be notified as quickly as possible.

Signature of parent / guardian

Date