



VUNG TAU KIDDIE GROUP

Let's Play, Learn and Grow Together

ĐC: No. 1 Truong Vinh Ky St., Vung Tau City Vietnam

ĐT: 0253 852 486

ID PICTURE

STUDENT REGISTRATION FORM

I. STUDENT DATA:

_____	_____	_____
(Surname)	(Middle)	(First)
_____	_____	_____
Birthday (dd/mm/yyyy)	Nationality:	(Nickname)
Address: _____		
(Number/Street/City)		
<ul style="list-style-type: none"> Does your child have any physical disabilities that would prevent him or her from participating in activities? Yes <input type="checkbox"/> No <input type="checkbox"/> Allergies: _____ 		

II. FAMILY DATA:

_____	_____
(Mother)	(Father)
_____	_____
(Mother's Occupation)	(Father's Occupation)
_____	_____
(Place of Employment)	(Place of Employment)
_____	_____
(Mother's phone no.)	(Father's phone no.)
_____	_____
(Email Address)	(Email Address)
If parents cannot be reached, whom shall we call in case of emergency?	
_____	_____
(Name)	(Telephone)
I hereby state that the information provided on this document is true and correct.	
_____	_____
(Signature under printed name)	(Date)

III. KINDERGARTEN ENTRY REQUIREMENTS:

<ul style="list-style-type: none"> Registration Fee 6,000,000 VND Tuition Deposit Uniform A 250,000 vnd/set Uniform B 120,000 vnd/pc Birth Certificate or passport copy 2 x 2 inches pictures (2 pcs.) 	<p>The following vaccines are required for students entering Kindergarten:</p> <ul style="list-style-type: none"> TB- Vaccines Polio Measles Hepatitis B Hepatitis A Mumps Varicella (Chickenpox) DTP/DTaP/DT Rubella (MMR)
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To be filled up by school a representative:

Admitted to: _____

(Group Name) (Date) (School Representative)