

Kindergarten COPADIMA

Kangumbe

P.O. Box 5038

Divundu, Namibia

Tel +264 81 741 47 71

eMail info@dipupo.com

Web: <http://dipupo.com>

Infant application form

CHILD'S INFORMATION

Full Names: (as indicated on birth certificate) _____

Surname: (as indicated on birth certificate) _____

Nick Name: _____

Gender: _____

Home language: _____

Physical address: (Street and stand number) _____

Choice of package: Half day, from 08:00 – 13:00

() Monday, () Tuesday, () Wednesday, () Thursday, () Friday

PARENT/GUARDIAN INFORMATION

Father's full names: _____

Cell phone number: _____

Email address: _____

Mothers's full names: _____

Cell phone number: _____

Email address: _____

Guardian's full names: _____

Cell phone number: _____

Email address: _____

MEDICAL INFORMATION (answer all questions, do not withhold any information)

Name of your family doctor: _____

Telephone number: _____

Does your child suffer any illness? _____

If yes, give details: _____

Does your child have any allergies? If yes, give details. _____

Has your child had all his/her immunizations? ____ (Please attach copy of medical certificate)

Does your child have any physical disabilities? _____

If yes, give a short description there of _____

Instruction to the school in case of an emergency: _____

APPLICATION FEE:

A N\$ 100 non-refundable application fee is required at the time of admission for all new learners. This fee reserves a seat and covers the application review process, administration costs, as well as admission and yearly assessment test if applicable.

HALF DAY:

08:00 – 13:00, 5 days per week

First child – N\$ 100.00 per month for 12 months

Second child – N\$ 50.00 per months for 12 months

The fee must be paid by the first of the month

Late pick-ups – An hourly rate of N\$ 10.00 per hour will be applicable for late pick-ups, which must be paid upon pickup.

I / we _____ parent/s or guardian of the above-mentioned child hereby agrees that all information given to Kindergarten COPADIMA is true and correct.

I / we are agreed with payment details

DATE

SIGNATURE
