

EBEN BROOKES JUNIOR SCHOOL

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Admission Form and parent fees Agreement for Playgroup and Pre-school children

Details of the Child:

Child's Surname:	Child's Middle Name:	Child's First Name:
Child's Date of Birth: Day - Month - Year __ / __ / ____	Male <input type="checkbox"/>	Female <input type="checkbox"/>

Details of the parent or Guardian

Name of the person completing this form:		
Title:	First Name:	Surname:
Physical Address:	Work Tel Contact: Home Tel Contact:	Postal Contact:
Profession:	Employer's Name and Contact:	Self-employed - Location
Relationship to child: _____		
Does this child live with you? Yes <input type="checkbox"/> No <input type="checkbox"/>		
If no, who with or where does the child live? _____		
I can confirm I am responsible for paying the school fees and will pay on time at the beginning of every term:		
Name _____ Signature: _____		

More Details about the parents or Guardians

Religion:	Nationality:	ID or Passport No:
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Signature: _____	Name in Block letters: _____	Date: _____
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Official Use Only

Placement pending

Placement approved