



Elite Kids

MONTESSORI

Primary | Kindergarten | Daycare

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www.elitekidsmontessori.com @EliteKidsUg

REGISTRATION

Full name of ChildGender.....

Name child is called byDate of Birth.....

Nationality.....Religion.....

Home address/location.....

Child is under the custodial care of (tick appropriate answer):

(Both parents) (Mother) (Father) (Other).....

Number of brothers (and their ages).....

Number of sisters (and their ages).....

Father's Name and Occupation.....

Workplace.....WhatsApp Number.....

Other telephone numbers.....

Email Address.....

Mother's Name and Occupation.....

Workplace.....WhatsApp Number.....

Other telephone numbers.....

Email Address.....

How did you hear about Elite Kids Montessori?

Why did you choose Elite Kids Montessori?
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NOTE: Please attach the child's passport photo, that of the parents/guardians and the next of kin

PLEASE TURN OVER

Emergency contact information if father or mother cannot be reached

Name.....Relationship.....Contact.....

Name.....Relationship.....Contact.....

Special information or concerns (allergies/sicknesses we should be watchful about)

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Please tick the desired class

(Toddler: 2-3 years) (Early Learners: 3-4 years) (Pre-K: 4-5) (Pre-Primary: 5-6 years) (Daycare)

Please tick desired programme: (Full Day) (Half Day)

I/We have read and provided the requisite information for purposes of registration at Elite Kids Montessori.

Name.....

Signed.....

Date.....

Name.....

Signed.....

Date.....

FOR OFFICIAL USE ONLY

Date of Registration.....

Registration Fee (70,000) received.....

School fees paid.....