



Let The Child Blossom

BANYAN TREE WORLD SCHOOL

ADMISSION FORM

No.

Name of child _____

Gender: M F Date of Birth _____

Child's Home Address : _____

Father's Name : _____

Father's Occupation : _____

Father's Mobile / Work Phone : _____

Email: _____

Mother's Name : _____

Mother's Occupation : _____

Mother's Mobile / Work Phone : _____

Email: _____

Mother Tongue : _____

Who other than the Child's parents has the permission to pick up the Child from the school ? (Children will not be released without the written authorization from the parent or guardian)

Name: _____ Relationship: _____

Name: _____ Relationship: _____

Note: I am willing for my child _____ to have Medical attention and be taken to the hospital in the case of emergency if / we cannot be reached.

Has your child have play group experience? Yes/No. If yes Where?
