



ENROLLMENT FORM 2011-2012



FOR ADMINISTRATIVE USE ONLY

Student Last Name _____ Student First Name _____

Sex M F Date of Birth DD/MM/YY _____

Courses desired : _____

Availability :

1 _____

2 _____

3 _____

We make every effort to take your availability into account, but cannot in all cases guarantee satisfaction.

EV <input type="checkbox"/>	n°/children : _____	start date _____
ATD <input type="checkbox"/>	dossier under name of : _____	semester _____
MINI <input type="checkbox"/>	_____	_____
TH <input type="checkbox"/>	_____	disc 10 <input type="checkbox"/>
CP30 <input type="checkbox"/>	CP30 <input type="checkbox"/>	CP30 <input type="checkbox"/>
CP45 <input type="checkbox"/>	CP45 <input type="checkbox"/>	CP45 <input type="checkbox"/>
CC <input type="checkbox"/>	CC <input type="checkbox"/>	CC <input type="checkbox"/>
DAY _____	DAY _____	DAY _____
PROF _____	PROF _____	PROF _____

date : _____	banque & n° _____	
CH _____	CC _____	ESP _____
** do not accept dossier without this payment **		

First & Last Name: Mother _____ Father _____

Name and telephone number of any responsible third party (babysitter, etc.): _____

Home telephone: _____ Father's cell phone: _____

Mother's cell phone: _____ Student's cell phone: _____

Mother's email address: _____

Father's email address: _____

Student's email address: _____

Street address: _____

Postal code and city: _____

School / grade: _____

How did you hear of the Ecole Koenig? _____

By signing below I certify that I have received and understood the following registration documents:

- * Enrollment Form (to be returned completed and signed)
- * Payment Schedule Options (to be returned completed and signed)
- * School Policies (to be returned completed and signed)
- * Safety & Permissions Form (to be returned completed and signed)
- * School Year Calendar for 2011-12

Signature _____ Date _____