



Entry date : \_\_\_\_\_ Grade : \_\_\_\_\_

## Pupil's information

Family name : \_\_\_\_\_ First name : \_\_\_\_\_  
 Sex :  Male  Female N° AVS : \_\_\_\_\_  
 Date of birth : \_\_\_\_\_ Nationality : \_\_\_\_\_  
 Mother tongue : \_\_\_\_\_ Other languages: \_\_\_\_\_  
 Current school : \_\_\_\_\_ Current grade : \_\_\_\_\_

## Pupil's health

Health/accident insurance : \_\_\_\_\_  
 Precautions to be taken by the school regarding illnesses, allergies, ... :  yes  no  
 If so, which ones : \_\_\_\_\_  
 \_\_\_\_\_

## Parents information

Father's family name : \_\_\_\_\_ Father's first name : \_\_\_\_\_  
 Address : \_\_\_\_\_  
 Profession : \_\_\_\_\_ Employer : \_\_\_\_\_  
 Home phone no. : \_\_\_\_\_ Mobile phone no. : \_\_\_\_\_  
 Email : \_\_\_\_\_ Correspondence :  French  English

Mother's family name : \_\_\_\_\_ Mother's first name : \_\_\_\_\_  
 Address : \_\_\_\_\_  
 Profession : \_\_\_\_\_ Employer : \_\_\_\_\_  
 Home phone no. : \_\_\_\_\_ Mobile phone no. : \_\_\_\_\_  
 Email : \_\_\_\_\_ Correspondence :  French  English

## Parental authority

	Both	Father	Mother
If parents are divorced/separated, who has legal custody of the child? *	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If parents are divorced/separated, with whom does the student live?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If parents are divorced/separated, school information send to which address?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

\* If only one parent has CUSTODY OF child, kindly prove the copy of the divorce judgement

## School fees

Preschool - full time

Preschool - 5 mornings

Preschool - \_\_\_\_\_ full days

Please specify which days : \_\_\_\_\_

Year 1 and 2

Year 3 to 6

Year 7 and 8

Year 9 to 11

## Options

**Midday meals** - with supervision from 12:00 to 13:30

Monday

Tuesday

Wednesday

Thursday

Friday

**Supervised homework** – from 15:45 to 17:00

Monday

Tuesday

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Thursday

**Morning care** – from 7:15 to 8:00

Monday

Tuesday

Wednesday

Thursday

Friday

**Afternoon care** – from 15:40 to 18:00

Monday

Tuesday

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Thursday

Friday

**Wednesday afternoon club** – from 13:00 to 18:00

Yes

No

**Transport** – round trip

Monday

Tuesday

Wednesday

Thursday

Friday

## Billing method

Billing period :

annually (2% discount)

per term

monthly

Bill addressed to :

father

mother

other

If other, to whom :

\_\_\_\_\_

## Parents' wishes

I agree that my child's photographs/videos may be used in school communication/marketing.

yes

no

I authorise the teaching staff to administer medication to my child in case of emergency.

yes

no

I authorise my child to leave the school alone

yes

no

My child is receiving medical treatment, sees a speech therapist or other.

yes

no

## Carnet des Copains

To facilitate the communication amongst families, you will receive a list of students enrolled in Ecole Riviera with the information below. Please select the items you agree to share.

Surname & first name of pupil	<input type="checkbox"/> yes	<input type="checkbox"/> no
Date of birth	<input type="checkbox"/> yes	<input type="checkbox"/> no
Address	<input type="checkbox"/> yes	<input type="checkbox"/> no
Phone number	<input type="checkbox"/> yes	<input type="checkbox"/> no
Father's mobile phone	<input type="checkbox"/> yes	<input type="checkbox"/> no
Mother's mobile phone	<input type="checkbox"/> yes	<input type="checkbox"/> no
Father's email address	<input type="checkbox"/> yes	<input type="checkbox"/> no
Mother's email address	<input type="checkbox"/> yes	<input type="checkbox"/> no

## Signature of parents or legal guardian

By signing this document, the parents, and/or legal representative or financially responsible confirm that they have read, understood and accepted the general terms and financial conditions here attached. Hereby declaring that all the enclosed information is correct.

Place / date : \_\_\_\_\_

Father's signature : \_\_\_\_\_

Place / date : \_\_\_\_\_

Mother's signature : \_\_\_\_\_

*Important : The inscription is reserved upon reception of the admission fees (see general terms). The tuition invoice will follow your payment within one week and will serve as confirmation.*

### Documents to be attached

- A recent passport photo
- A photocopy of pupil's identity card/passport
- A photocopy of his health/accident insurance
- Previous year's school report