



English playschool

Hakemuslomake

Registration form

20 __ / 20 __

Kalevankatu 10
40100 Jyväskylä

Tel: (014)612 327

Fax: (014)372 2279

E-mail: leikkikoulu@intlång.fi

Child's Name:

Mother's Name:

D.O.B & Social Number:

Social Number:

Address:

Profession/Place of employment:

Father's Name:

Preferred Group:

Social Number:

Alternative Group:

Profession/Place of employment:

Allergies

Phone

Home: _____

All school fees are due and payable on the first day of each month.

Mother/Work: _____

Date: _____

Father/Work: _____

Signature: _____

E-mail: _____

