

**QUEEN DADA DAYCARE AND KINDERGARTEN**

**EMAIL: [qdadaltd@gmail.com](mailto:qdadaltd@gmail.com)**

**TEL: 0757333083/0113669004**

**ADMISSION FORM**

**GRADE: \_\_\_\_\_**

CHILD'S NAME ..... MIDDLE NAME ..... FAMILY NAME .....

DATE OF BIRTH.....AGE.....GENDER.....NATIONALITY.....

PARENTS/GUARDIAN.....ID NUMBER.....

HOME LOCATION.....TEL.....

POSTAL ADDRESS.....EMAIL.....

OCCUPATION.....

COMPANY NAME.....

COMPANY LOCATION.....

**EMERGENCY CONTACT**

CONTACT 1: NAME.....TEL NO.....

RELATION WITH THE CHILD:.....

CONTACT 2: NAME.....TEL NO.....

RELATION WITH THE CHILD.....

**MEDICAL PROBLEMS**

Please describe any medical problem of which the centre should be aware of e.g allergies or medications.

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Do you have any medical insurance cover? YES..... NO..... (If Yes, Attach photocopy. This is to assist in case of any emergencies and parent is out of reach).

Do you have any preferred family doctor/hospital? YES..... NO..... (If YES, Indicate name of doctor/hospital. NAME.....TEL.....

**DECLARATION**

I declare that all the information fill in this form is true to the best of my knowledge.

SIGNATURE OF PARENT/GUARDIAN..... DATE.....

**QUEEN DADA DAYCARE**  
**MKOROSHONI CAMPUS**  
**EMAIL: [qdadaltd@gmail.com](mailto:qdadaltd@gmail.com)**  
**TEL: 0757333083**  
**RULES/REGULATIONS**

1. The child must be up to date with immunization schedule for their age group and show proof. For preventive measures the management reserves rights to conduct periodic medical checkup of all pupils when necessary. Parents/guardians hereby authorize the administration to carry out checkup and hereby accept to apply the cost for the same and undertake to arrange for the necessary treatment to be given to their child as recommended in the medical report.
2. All children are expected to report with requirements highlighted.
3. All children are expected to be picked as per the stipulated service schedules.
4. The management reserves right to revise the regulations as found necessary.
5. All concerns and complains should be communicated through the proper channels and centre diary and must be signed by the parent/guardian.
6. The management reserves the right to revise fees as and when found necessary. In case of **termination of admission**, 2 months' notice must be given in writing and fees become due and payable until withdrawal is notified in writing. All dues once paid are not refundable.

**EMERGENCY PROCEDURES**

In the event of an emergency where a child is required to access medical care, the management will authorize administrators to arrange for care as deem appropriate. However, the parents shall be responsible for all expenses incurred.

**REGISTRATION PROCEDURE**

Dully filled registration form and proof of service fees payment should be submitted to the centre administration office for confirmation.

**DECLARATION**

I declare that I.....has carefully read, understood and accept the rules and regulations stipulated by QUEEN DADA DAYCARE CETRE.

SIGNATURE OF PARENT/GUARDIAN..... DATE.....