



PREP INTERNATIONAL KINDERGARTEN

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STUDENT REGISTRATION FORM

Office Only

Entry Class Student Number

Date of admission: / /

Attach
recent photo
of child

Student Information

First name(s) Last name

Nickname Date of birth (D/M/Y)/...../.....

Age Gender: Male Female Blood Group

Place of Birth Nationality Religion

Languages Spoken..... Languages Spoken at Home

Siblings:

Name Date of Birth/...../..... School

Name Date of Birth/...../..... School

Parent & Caregiver Information

Parents are: Married Separated / Divorced

Father's Name

Age Place of Birth

Nationality Religion

Education / Degree

University

Home Address

.....

Home Phone Mobile Phone

Occupation..... Organisation

Work Phone Fax / E-mail.....

Mother's Name.....
Age Place of Birth
Nationality Religion
Education / Degree University.....
Home Address same as Father, or:
.....
Home Phone Mobile Phone
Occupation Organisation
Work Phone Fax / E-mail.....
Caregiver's name Relationship to family
Home Phone Mobile Phone

Emergency Contact (in case Prep cannot contact parents)

Name Relationship
Home Phone Mobile Phone

Medical & Personal Information

- Who is your child's regular doctor/pediatrician?
Dr. Hospital Phone
- Does your child have physical needs or limitations of which the school should be aware?
 Yes No. If yes, please explain:
.....
- Does your child take any medication regularly? Yes No
If yes, please explain:
.....
- Has your child received required vaccinations? Yes No
- Does your child suffer from any allergies? Yes No
If yes, please explain:
.....
- Does your child require special diet? Yes No
If yes, please explain:
.....

7. Tell us a little more about your child (e.g., likes & dislikes)

.....
.....
.....
.....

Why Prep?

8. How did you come to know about Prep International Kindergarten?

- Friends Family Advertisement Website Facebook
 Other, please specify

9. Has your child been to any other Kindergarten or playgroup before?

- Yes No If yes, please specify:

10. What are your main reasons for choosing Prep International Kindergarten?

- Montessori Method Class Sizes Tuition Fees
 Academic/Curriculum Location Natural Surroundings
 Other, please specify

Documents to be Attached

Please provide copies of the following documents:

- Child's Birth Certificate Child's Vaccination Record
 Father's ID Card/Passport Mother's ID Card/Passport
 Caregiver's ID card House Registration
 Photos (approx. 1", see below)

Photographs

Father

Mother

Caregiver 1

Caregiver 2*

*Please include photographs of people who will pick up your child after school

House Location Map

Please sketch out the location of your house. (We require this in case of an emergency.)



Parent Signatures

Please verify the information given in this registration form by signing below.

.....

Father's Signature

Date:/...../.....

.....

Mother's Signature

Date:/...../.....

Thank you

.....

Prep Office Signature

Date:/...../.....