

**THE ASCENSION KINDERGARTEN**11 FRANCIS THOMAS DRIVE SINGAPORE 359338 TEL: 6382-1110
EMAIL: kindergarten@akg.edu.sg

Attach photo

REGISTRATION FORM 2020**Please fill in BLOCK LETTERS**

Child's Name (as in BIRTH CERTIFICATE)		Name in Chinese Characters				
Name to appear on school badge (max 18 spaces)		Birth Certificate No.		Date of Birth		
Country of Birth	Nationality (Please Circle) Singaporean/ SIN PR/ Others	Races (Please Circle) Chinese/Malay/Indian/Others		Sex: F/ M (please circle)		
Address					Postal code	Home Telephone
Blk/house No	Street Name	level	Unit No	Building name		

PARTICULARS OF BROTHERS OR SISTERS (if any) in the family

NAME	AGE	SEX	NAME	AGE	SEX
(1)			(2)		
(3)			(4)		

PARTICULARS OF PARENTS /GUARDIAN	FATHER / GUARDIAN	MOTHER/GUARDIAN
Name		
Identity Card No.		
Nationality (please circle)	Singaporean / SIN PR / Others	Singaporean / SIN PR / Others
Highest educational level		
Please indicate religion	Anglican/ Other Christians/Non-Christians	Anglican/ Other Christians/Non-Christians
Name of Church (if applicable)		
Occupation		
Name of Present Employer		
Office & Handphone Contact Nos.	/	/
Email Add (pls tick main recipient)	<input type="checkbox"/>	<input type="checkbox"/>

IMPORTANT: In the event of an EMERGENCY and parents are not available or contactable, particulars of the NEXT-OF-KIN to be contacted:

Person to contact: (NOT Parent) :	Relationship to Child:
Address:	Contact No:

ADDITIONAL INFORMATION ABOUT YOUR CHILD

- Has child previously attended any Playschool/Nursery/Kindergarten? Yes /No (Please Circle)
- If Yes, please state name of Playschool/Nursery/Kindergarten: _____
- First Language spoken at home: _____
- Other Language/Dialects spoken at home: _____

MEDICAL INFORMATION	Does your child have the following?	Yes	No	SPECIFY
	Fits			
Asthma				
Diabetes				
Dietary Disorder				
Allergy				
	Others: (Please specify)			
Name & Contact of regular doctor: _____				
Does your child has any <u>long-term</u> medication? If yes, please provide details:				
Name of medicine: _____				

RULES AND REGULATIONS FOR PARENTS/GUARDIANS TO ADHERE TO:

1. Registration Fee paid is non-refundable.
2. A student pass processing fee of \$60.00 is payable upon registration. Student pass application with ICA will commence from 1 October for children who register during our registration exercise and immediately for those who join us anytime during the school term. Please note that the processing fee will not be refundable once the application process has begun with ICA.
3. Deposit is payable upon confirmation of enrolment in the kindergarten and it will be used to offset the final term fee in K2. The refund / forfeit of the deposit will be in accordance to terms under **Withdrawal** below.
4. Term fees, optional items/programs shall be paid by the first week of each school term. Should fees remain unpaid by the due date, the child shall be deemed to have withdrawn from the kindergarten without notice and deposit will be forfeited.
5. Term fees paid are not refundable or transferable.

6. WITHDRAWAL

6.1 New Enrolment (preceding year admission)

For a refund of deposit BEFORE the commencement date of the school term, a written notice of withdrawal must be given to the kindergarten Office **before/on the 1st day of November of the registration year.**

An administrative fee of \$85.60 (incl GST) is chargeable for such withdrawal. Failure to provide notice within required withdrawal notice period, a ONE month equivalent of fees will be deducted from deposit.

6.2 New Enrolment (admission during the year)

For a refund of deposit BEFORE the commencement date, a written notice of withdrawal must be given to the kindergarten Office **ONE (1) month before the first day of the commencement date.**

An administrative fee of \$85.60 (incl GST) is chargeable for such withdrawal. Failure to provide notice within required withdrawal notice period, a ONE month equivalent of fees will be deducted from deposit.

6.3 Existing Students

A written notice of withdrawal must be dated **ONE (1) month before the last day of the current school term** and given to the kindergarten Office in order to qualify for a full refund of the deposit. Failure to provide notice within required withdrawal notice period, a ONE month equivalent of fees will be deducted from deposit.

7. DEFERMENT

Deferment is subject to approval. Please refer to the Terms & Conditions under the Parents' Handbook.

8. If the child is eligible for CDA, application must be made with the Kindergarten Office *at least TWO months before* the activation for deduction.
9. In the event of an emergency, the kindergarten has the right to seek medical attention for my child including sending to nearest clinic or hospital on my behalf.

DECLARATION

I, _____ hereby declare that I am fully aware that my child/ward will receive instruction in the Christian Faith. I have read the above rules and regulations and agree to abide by them.

Signature: _____

Date: _____

FOR OFFICAL USE	
Documents received (Please tick)	
<input type="checkbox"/> Copy of child's Birth Certificate, Entry/Re-entry Permit, Dependant Pass, Long Term Pass/Visit Pass whichever is applicable. <input type="checkbox"/> Copy of child's Immunisation Record of National Childhood Vaccinations <input type="checkbox"/> Copy of parents' NRICs, Entry/Re-entry Permits, Dependant Pass, Employment Pass, Visit Pass whichever is applicable.	
Registration phase: I / II / III Serial No.: _____ Level : N1 / N2 / K1 / K2 Session : 1 st / 2 nd	Is the child on Baby Bonus scheme? Yes / No If yes: OCBC / POSB / UOB
Remarks: _____	
Date of Registration: _____ Registration Fee: S\$60.00 RCPT No. _____ Cash / Cheque No. _____ Bank _____ Keyed in by: _____ <div style="text-align: right;">Admin / Date</div>	Date of Admission: _____ Playroom: _____ Session: <div style="text-align: center;">N1 / N2 / K1 / K2</div> <div style="text-align: right;">1st / 2nd</div> Approved by: _____ <div style="text-align: right;">Principal / Date</div>