

Registration Form

Passport Photo

OFFICE USE:

Joining date: _____ Class: _____

Duration Fee Paid: _____ Retainer Fee Amount Paid: _____

Child information

Full Name: _____ Nickname: _____

Nationality: _____ Spoken Language: _____

Date of Birth: _____ Religion: _____ Gender: _____

Address: _____

Mother's information

Mothers Full Name : _____

Mobile Phone is: _____

Work Phone is: _____

Email is: _____

Father's information

Fathers Full Name: _____ Company: _____

Mobile Phone is: _____

Work Phone is: _____

Email is: _____

Emergency contacts (other than parents)

In case of emergency and we cannot reach parents, is there anyone else we can contact?

Emergency Contact Name : _____ Phone: _____

Relationship to Child: _____ Resident of UAE: _____

PICK UP AUTHORITY (OTHER THAN PARENTS)

Please write the names of people that are permitted to collect your child and submit a copy of their EID or passport e.g. friend, nanny, driver. For anyone not listed we will not allow them to pick up your child

Name : _____ Phone: _____

Relationship to Child: _____ Resident of UAE: _____

DAYS AND TIMINGS

Spaces are subject to availability and every effort will be made to accommodate your preferred days and timings. Please tick your preferred days and timings: **PLEASE NOTE: FS 2 TIMINGS ARE 8AM-2PM**

8am-11am	8am-2pm	8am-6pm	12-3pm	12-5pm	3-6pm

OTHER INFORMATION

How did you hear about Little Diamond Nursery? _____

Does your child require any learning support? If so, provide details below: