

SCHOOL CONTRACT APPLICATION School Zug

PRE-SCHOOL

Please use capital letters.

Child's details

Surname: _____

First name(s) _____

Date of birth: _____ Sex: _____

Nationality: _____ Siblings: _____

Mother-tongue(s): _____ Other languages: _____

Address: _____

Previous pre-schools: _____

Pre-School:

Please tick the Pre-School programme you would like your child to attend after the summer holidays **in addition to** the standard programme indicated:

Pre-3

Standard programme:

3 mornings

plus:

- Monday mornings
- Friday mornings
- Monday afternoons
- Tuesday afternoons
- Wednesday afternoons
- Thursday afternoons
- Friday afternoons (forest school)

or:

Full-time programme
(5 mornings, 4 afternoons)

plus:

- Wednesday afternoons

Pre-4

Standard programme:

5 mornings

plus:

- Monday afternoons
- Tuesday afternoons
- Wednesday afternoons
- Thursday afternoons
- Friday afternoons (forest school)

or:

Full-time programme
(5 mornings, 4 afternoons)

plus:

- Wednesday afternoons

Anticipated date of entry: _____ school year: _____

Trial day(s): _____

Admission:

School Management has the right to contact the child's previous schools for academic details as well as details of their behaviour. Admission is subject to a successful meeting, availability and possible trial days. The decision will be confirmed in writing.

Mother's details

Surname: _____

First name: _____

Mother-tongue: _____ Nationality: _____

Marital status: _____

Profession & Employer: _____

E-Mail: _____

Mobile telephone: _____

Father's details

Surname: _____

First name: _____

Mother-tongue: _____ Nationality: _____

Marital status: _____

Profession & Employer: _____

E-Mail: _____

Mobile telephone: _____

Company Details (applicable if school fees are paid by employer)

Company name: _____

Billing address: _____

Contact person: _____

Please note that by signing this school contract a legally binding contract is concluded. The attached General Terms and Conditions and the current price list are legally binding components of this contract. Please return the completed and signed application to the school office. This secures a place for your child at our school subject to the decision of the School Management regarding a definitive admission and availability of a place. Should this application be withdrawn an invoice will be issued in any case for the first trimester of the school year plus the enrolment fee and the signee/s accept herewith to pay this bill within 10 days. **With my signature, I confirm that I have read and understood the General Terms and Conditions and the terms of this application form. Thank you very much for the application.**

Parent's surname and first name: _____
(please use capital letters)

Parent's signature: _____

Place & Date: _____