

## **Holiday Registration Form**

| Child`s First Name and Surname:                           |                         |
|---|-------------------------|
| Date and Place of Birth:                                  |                         |
| Birth Number:   |                         |
| Nationality:  |                         |
| Citizenship:  |                         |
| Native Language:  |                         |
| Address:  |                         |
| Health Insurance Company:                                 |                         |
| Allergy and Other Important Information:                  |                         |
|   |                         |
|   |                         |
| Parents/Guardians:  |                         |
| <u>Mother</u>   | <u>Father:</u>          |
| First Name and Surname:                                   | First Name and Surname: |
| Date of Birth:  | Date of Birth:          |
| Address:  | Address:                |
| Contact: Phone Number:                                    | Contact: Phone Number:  |
| Work Phone Number:  | Work Phone Number:      |
| E-mail:   | E-mail:                 |
| Attendance Information: <sup>1</sup>                      |                         |
| Required Attendance:                                      |                         |
| 1.75.7 8.712.7 15.719.7 22.726.7 29.7-2.8 5.89.8 12.816.8 |                         |
| 19.823.8.   |                         |
|   |                         |
| Signed Parent/Guardian Date                               |                         |

<sup>&</sup>lt;sup>1</sup> Delete as appropriate