



# KAYPRO ACADEMY

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Email: kayproacademy@gmail.com  
Lusaka, Zambia

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## **REGISTRATION FORM**

### **A. PARENTS/GUARDIANS**

NAME OF PARENT/GUARDIAN.....

PHYSICAL ADDRESS.....

MOBILE CONTACTS.....

EMAIL:.....

### **B. LEARNER**

NAME OF LEARNER.....

SEX .....

DATE OF BIRTH .....

NAME OF PREVIOUS SCHOOL.....

TOWN CITY .....

REQUESTED GRADE.....

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Terms of enrollment

1. I, .....do request Kaypro Academy to enroll my child in the grade as stated above
2. I, further agree to meet my obligations to Kaypro Academy, including timely settlement of all school payments and other requirement

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

***"EDUCATION FOR A BETTER FUTURE "***