

## 2023 -24 Academic Year Addis Maya PlaySchool Admissions form

Addis Maya playschool offers admission to children between the ages of 1 to 4 year olds throughout the year, starting from September for the following academic year. Students who celebrated their 1 year birthday are eligible to apply.

Please attach, Immunization form, Birth Certificate of the child, Photo of the parents and child along with this admission form.

## **Admissions form**

Addis Maya Playschool Admissions Form

Child's Information: Full Name: Date of Birth: Gender: Nationality: Language(s) spoken at home:			
Father /Guardian Information: Name:			
Phone Number:			
Email Address:			
Occupation / Name of Company:			
Mother /Guardian Information: Name:			
Phone Number:			
Email Address:			
Occupation / Name of Company:			
Emergency Contact Information: Name:			
Relationship to child:			



Phone Number:
Program Selection: Please select the program you want to apply  □ Early years 1 (1-2 years old) - EY 1  □ Early years 2 (2-3 years old) - EY 2  □ Early years 3 (3 and above years old) - EY 3 & EY 4
List other family members attending Addis Maya Play School
Additional Information:  Does your child have any special needs or require any accommodations? If yes, please specify - the school will conduct its own assessment
Has your child attended a preschool / daycare before? If so, where and how long?
Names, ages and relationships of other members in your house including siblings.  Name Relationship Age
Names of people, other than parents, who may pick up your child from school:  1
2
Addis Maya Playschool provides 3 meals for the children (1 morning snack and 2 afternoor snacks)
Are there any medical or dietary restrictions we should be aware of?  Does your child have any food allergies?
How did you hear about our school
<ul><li>Website</li><li>Social Media</li><li>friend / colleague recommendation</li><li>□ Other</li></ul>

Registration will be open starting from Sept 20, 2023.



## **Medical Consent in Case of Emergency:**

Doctor's Name:
Name of Clinic:
Clinic Address and Phone number:
If the above named doctor is not available, Addis Maya Schools may take my Child to th
nearest hospital. I give permission for the school.
Parents will be responsible for all medical costs.
Signature: By signing below, I acknowledge that I have read and agree to the terms and conditions.  Parent/Guardian name:
Signature:
Date:

Thank you for your interest in Addis Maya Play School. We will review your application and contact you regarding next steps.

With this form, please attach Immunization certificate, child birth certificate, 3 photos of the child. 2 photos of the parent.

Please note that, once we review your admissions form, you will be called for an interview and your child will undergo a general assessment by our team of specialists.



## **Child Photo Release form**

Ι,,	, the parent of	grant Addis
Maya Playschool to use the photo and social media).	ographs my child for ar	ny school related activities (website
Furthermore, I understand that n	o royalty fee or other o	compensation shall become payable
to me by reason of such use.	, ,	
☐ Grant Permission		
☐ Decline Permission		
Parent / Guardian's Signature		_ Date
Parent / Guardian's name:		
Child Name:		