



A foundation for the future

# Enrollment Form

Student's  
Passport Photo

## Personal Information

Date of Enrollment: / /

Child's Name \_\_\_\_\_

Date of Birth / /

Child's Gender \_\_\_\_\_  
Male  Female

Child's Age \_\_\_\_\_

Admission Number \_\_\_\_\_

Father's Name \_\_\_\_\_

Father's ID. NO. \_\_\_\_\_

Father's Cellphone \_\_\_\_\_

Mother's Name \_\_\_\_\_

Mother's ID. NO. \_\_\_\_\_

Mother's Cellphone \_\_\_\_\_

Guardian's Name \_\_\_\_\_

Guardian's ID. No. \_\_\_\_\_

Guardian's Cellphone \_\_\_\_\_

Specific Place Where the Child Lives \_\_\_\_\_

The name of the person picking the child from school if the parent is not available:  
Name \_\_\_\_\_ Cellphone \_\_\_\_\_

List any special problems that your child may have; such as allergies, existing illness, previous serious illness, injuries during the past 12 months, any medication prescribed for long term continuous use, or any other information which staff should be aware:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## SCHOOL REQUIREMENTS

- Passport Size Photo
- Extra Clothes Especially for the 3 year Old Children
- A pair of crocs
- Ensure that all of your Child's items are clearly labelled with embroidery
- Copies of parents ID
- Copy of birth certificate
- Copy of immunization form
- Drinking water.
- A small blanket and bed sheet
- Wipes, bibs, diapers

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✉ lozichristianschool@gmail.com

THANK YOU FOR REGISTRATION



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## AUTHORIZATION FOR EMERGENCY MEDICAL ATTENTION:

In the event I cannot be reached at the provided phone numbers, please use the following information and authorization.

*Option 1*

Name of the Physician \_\_\_\_\_

Name of the Hospital \_\_\_\_\_

Cellphone Number \_\_\_\_\_

Address/Location \_\_\_\_\_

I \_\_\_\_\_ (Parent/Guardian), give consent to this facility to secure any and all necessary emergency medical care for my child.

Signature \_\_\_\_\_

Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

## School Policies

- ▶ **Payment Deadline (Terms 1 & 2):** School fees for Term 1 and Term 2 must be fully cleared by the end of the second month of the respective term.
- ▶ **Payment Deadline (Term 3):** School fees for Term 3 must be fully cleared by the end of September.
- ▶ **Boys:** Hair must be kept short, neatly trimmed and clean. Extreme or fashionable haircuts (e.g., Dreadlocks, Mohawks, lines, dyes) are strictly prohibited.
- ▶ **Girls:** Hair must be neatly styled, clean, and tied back away from the face if it is long. Elaborate hairstyles, excessive accessories, or artificial hair attachments (wigs, extensions) are not permitted. Natural hair color must be maintained.
- ▶ Parents are required to inform the school in advance if their child will be absent.
- ▶ Parents should ensure their children have all the required books and materials at the beginning of every term.

I, the undersigned, hereby acknowledge that I have read, understood, and agree to abide by the school policies outlined above. I understand that failure to comply with these regulations may lead to disciplinary action.

FullName: \_\_\_\_\_

Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Signature: \_\_\_\_\_