

2018/19 LD ADMISSIONS FORM

ATTACH PHOTO HERE

OFFICE USE ONLY

Name of Emergency Contact:

Date Received:

Application Fees Received:

Please Print STUDENT INFORMATION Last Name: First Name: Preferred Name: Date of Birth: Gender: Nationality Hong Kong Permanent Resident: □F dd / mm / yy \square M ☐ Yes ■ No Home address: Home phone no.: First Language: Other Language/(s): Toileting Language: PARENTS/GUARDIAN INFORMATION Name of Father: Name of Mother: Father's Mobile: Mother's Mobile: Father's Office Number: Mother's Office Number: Father's e-mail: Mother's e-mail: Name of Guardian/Helper: Guardian's/Helper's Mobile: PERSONS AUTHORISED TO COLLECT CHILD Name: Mobile: Name: Mobile: MEDICAL AND OTHER NEEDS Does the applicant have any allergies, prescribed medication, health or physical concerns? ☐ Yes ☐ No If yes, please give details: Any other medical issues? Please inform us if there are any special circumstances (such as death, parent separation, adoption etc.) that may affect your child.

IN CASE OF EMERGENCY

Emergency Contact's Mobile:

PROGRAM	INTERNATIONAL STREAM		DUAL LA	NGUAGE STREAM	SCHOOL BUS REQUIRED	
	AM (9-12pm)	PM (1-4PN) AM (9-12p	om) PM (1-4PM)	YES/NO	
PRE-NURSERY/TRANSITION						
(aged 2-3 years: birth year 2016)						
NURSERY (K1)						
(aged 3-4 years: birth year 2015)						
LOWER KINDERGARTEN (K2)						
(aged 4-5 years: birth year 2014)						
UPPER KINDERGARTEN						
(K3) (aged 5-6 years: birth year						
2013)						
PARENTS/GUARDIAN INFORMATION						
Sibling's Name:	ling's Name:			dd / mm / yy	Gender: □ M □ F	
Sibling's Name: Date of Birth: dd / mm / y				dd / mm / yy	Gender: □ M □ F	
How did you learn of Fairchild Kindergarten?						
☐ Website ☐ Word of Mouth ☐ Newspaper ☐ Advertisement ☐ Facebook ☐ Other						
What is the educational path you have chosen for your child? What are your language goals for your child?						
□ International School □ Local School □ Not yet decided □ English □ Mandarin □ English and Mandarin						
CHECKLIST						
A completed and signed Admissions Form						
One photograph of the applicant (affixed to the admissions form)						
Copy of the applicant's Birth Certificate and/or Passport (with valid HK visa, for non-local family)						
Copy of applicant's immunization record & Report on Physical Examination						
Copy of parents' HKID and/or Passport (with valid HK visa, for non-local family)						
Application Fee of \$40 (Please make cheque payable to Fairchild Canadian Academy Limited)						
PARENTAL CONSENT AND ACCEPTANCE						
1. I declare that the information given in this admissions form is true, complete and accurate.						
2. I understand that only completed applications, including submission of application fee, and all required						
documents, will be considered for the processing of my child's application. 3. I understand that the school fee is payable over 11 months of the year – from August 2018 to June 2019.						
4. I agree that in the event of medical need, my child should be taken to the nearest public hospital.						
5. I understand that the application fee is non-refundable, non-transferable, and non-deferrable.6. I give my consent for Fairchild Kindergarten to use the personal data provided in this form for the purpose of						
processing my child's application.						
	7. I understand that a one-month notice of my renewal intention for the next month is appreciated or the payment of one-month fees in lieu of notice will be required.					
walking distance, weather permitting (student to adult ratio will be no more than 4:1).						
	9. We □give/ □do not give consent for Fairchild Kindergarten to use images of my child participating in school activities on the Fairchild Kindergarten website, social media pages, and promotional materials.					
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Parent/Guardian signature						