**This application must be submitted with the following:**



**APPLICATION FORM**

1. **Student’s Birth Certificate and Passport copy**
2. **Parents Passport and Visa copy**
3. **ID Copy & House Registration for Thai Parents**
4. **Updated Immunization Record of student**
5. **4 Passport size photos of student**
6. **1 Passport size photo of each parent**

# STUDENTS DETAILS

**First Name:**  **Nickname:**  **Date of Birth:** (DD/MM/YY)

**Last Name:**

**Place of Birth:**

**🗆 Male 🗆 Female Nationality :**

**Language Spoken at home:**

**Child's Attendance: 🗆** **Half Day 🗆 Full Day 🗆** **After School Care**

**Dietary Specifications: 🗆** **Vegetarian 🗆** **Non Vegetarian**

# PARTENTS DETAILS

**Father's Name:**

**Company Name:**

**Occupation:**

**Position:**

**Nationality:**  **Phone:**

**Email Address:**

**Mother's Name:**

**Company Name:**

**Occupation:**

**Nationality:**  **Phone:**

**Email Address:**

**Home Address:**

# AUTHORIZATION TO RELEASE CHILD:



**Name and photo of person (s) to whom your child may be released after school besides parents:**

**Name:** **Relationship:**  **Phone No:**

**Mother**

**Father**

**Nanny**

**Other**

# HEALTH RECORDS:

**Health or medical condition that requires the attention of the school (including toilet training)?**

**Allergies Drug/Food/Drinks**

**Name of school last attended**

**How did you know about Storytime Preschool?**

**🗆** **Word of Mouth**  **🗆** **Google 🗆** **Facebook 🗆** **Instagram**

**🗆** **Embassy 🗆** **Friends 🗆** **Others**

**PARENTS' AGREEMENT:**

1. **Whilst the management makes every effort to ensure safety in the school, I will not hold the school responsible for any accidents that may occur during my child’s enrollment. Permission is hereby granted to the school to seek medical or hospital attention for my child in the event of any emergency.**
2. **I hereby accept and agree to pay the fees in full before begin of the term, I also understand and agree that if I default in paying the fees, the school has the right to exclude my child from attendance.**
3. **I am required to continue the payment of the term’s school fees in full, if and when my child is away from school due to illness, holiday or other reasons.**
4. **I understand that the registration fee and school fees are non-refundable and non-transferable to other fees e.g., summer school fees, extra activity fee, van fees or towards the next upcoming school term.**
5. **From time to time the school will post pictures of students on Facebook, Instagram and use photos for marketing purposes. If you do not wish that your child’s picture is included, please inform the school in writing.**
6. **I hereby agree to release, indemnify and hold harmless Ploenchit International Kindergarten, Co., Ltd., its teachers, officers, directors and employees against any liability resulting from any, damage, injury to my child, or other claims, while my child is enrolled in Storytime Preschool Bangkok.**
7. **The school reserves the right to amend any clause stated herein without prior notice.**
8. **I declare that the information provided in this application by me is true and I have read and accepted all polices.**

**Signature of Parent:**

**Name of Parent:**

**Date:**

**.........................................................................................................................................................................................**

**Official use:**

**Date of Joining:** **Class:** **Booking Fee:**