

2. Contact Address:

3. Religion:

4. Church

5. Phones: 1.
2.

5 (B): Email:



PASSPORT

6. Mother's Name: (Surname First)

6a. Profession:

6b. Place of Work/ Business:

7. Contact Address:

8. Religion

9. Church:

10. Phones: 1.

2.

10. (B): Email:

11. NAMES OF GUARDIANS ALLOWED TO VISIT OR TAKE THE CHILD FROM SCHOOL. (Attach a Passport for each)

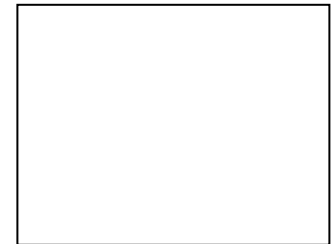
Guardian (A)

(aa)Name

(ab) Relationship:

(ac) Phone:1.

(ac) Phone:2.



(PASSPORT A)

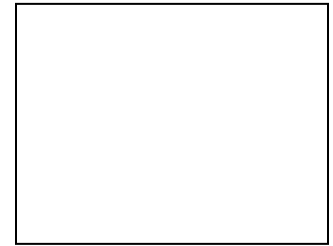
Res. Address:

Guardian (B)

(ca)Name:

(cb)Relationship:

(cc) Phone:1.



(PASSPORT)

(ac) Phone:2.

Res. Address

SECTION C

CHILD'S MEDICAL BIO DATA

1. Blood Group:

2. Genotype:

3. Weather Allergic:

4. Food Allergic:

Drug Allergic:

