



MERRYSTAR MONTESSORI ACADEMY

REGISTRATION FORMS

Contact:
0539-372-812

Location:
Amasaman Manhia Road, Peace Village Mackeon Estate

Email:
merrystarmontessoriacademy@gmail.com

Dear Parent/Guardian,

Welcome to Merrystar Montessori Academy. We are honored to have been chosen to nurture your child holistically, (physically, intellectually, linguistically, emotionally and socially).

This booklet requires you to give us all the information we need in order to help develop a good and personal understanding /relation of your child.

Please find enclosed form listed below:

- Registration forms
- Health forms
- Authorization forms for use of pictures and videos
- Child release authorization forms
- Speech and language forms
- Admission bills

REGISTRATION FORMS

Child's First Name.....Child's Last Name.....

Date of Birth.....Place of Birth.....

Nationality.....Sex.....

When would you like your child to start.....

Language Spoken.....

Name of Parent/Legal Guardian of the Child.....

Father/Legal Guardian's Profession..... Nationality.....

Mother /Legal Guardian's Profession..... Nationality.....

Brother's and Sister's name.

Residential Address.....

P.O. Box

Tel (Home)

Mother's Mobile.... ..

Mother's Work.... ..

Father's Mobile.....

Father's Work.....

Other person's contact in case of emergency: Name and telephone Number

.....
PLEASE NOTE THAT CHILDREN COMING FROM ANOTHER SCHOOL TO MERRYSTAR MONTESSORI ACADEMY WILL HAVE TO PROVIDE A COPY OF THEIR LAST REPORT

HEALTH FORMS

Name of Child's Doctor

.....

Name of Hospital

.....

Doctor's Telephone Number

.....

Child's Address

.....

.....

Immunization/vaccination

Has your child been fully immunized?

Diphtheria

HIB Meningitis

Whooping cough

Mumps

Tetanus

Rubella

Measles

Polio

Note: Please attach a copy of child's health record book

Does your child have any;

Allergies

Health problem

Special child illness

please specify

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AUTHORIZATION FOR USE OF PICTURES AND VIDEOS ON SCHOOL PREMISES

Dear Parent,

Merrystar Montessori Academy collects an archive of photograph and movies of our children at work. These records are taken in good taste by the class teacher only.

The photograph and movie may be used in the following way

- In the online album on the Merrystar Montessori Academy website and social media platform
- Visual support to train staff

Please fill up following authorization to show your approval

Child's name.....

Date

Group.....

I, the undersignedGIVE/DO NOT GIVE authorization to Merrystar Montessori Academy to post my child's picture and video on their website and other social media platform to include pictures of my child in training material for training teachers.

Parent's signature

.....

CHILD RELEASE AUTHORIZATION

Date:

I..... Mother and IFather,
ofhere by allow the staff at Merrystar Montessori Academy to release my child to.....

This letter enables them to physically release my child.....
to the said person without prior notice should such person (s) request so.

.....

(Mother)

.....

(Father)

Either or both parent / Guardian to sign

SPEECH AND LANGUAGE

Does your child say any recognizable word?

Yes

No

Does your child say any word?

Yes

No

What words (or how many) do they use?

.....
.....
.....
.....

Does your child enjoy any book?

Yes

No

Do he or she have a favorite book?

Yes

No

What is the name of the book?

.....
.....
.....
.....

Daily Requirement:

- Meal for the day
- 1 Drinking cup & sterilized bottles
- A bottle of drinking water
- Baby wipes & 2 changing attire (infant)
- Plastic spoons and 1 towel
- 1 face towel and disposable diapers
- A comb / hair brush and a clean cot sheet

Toiletries (To be provided before admission)

- Antiseptic (Camel big size) = 3
- Toilet roll (1 pack)
- Liquid soap = 1 bottle