ENROLLMENT FORM –
KARTA ZGŁOSZENIA DZIECKA
ŻŁOBEK DINUSIOWO
UL. LEMA 19

PARENTS/LEGAL GUARDIANS		
LEGAL GUARDIAN 1		
GIVEN NAMES, SURNAME		
NATIONALITY		
D.O.B. & PESEL (or ID no.)		
LEGAL GUARDIAN 1 HOME ADDRESS		
STREET and HOUSE NO.		
POST CODE, CITY		
LEGAL GUARDIAN 2		
GIVEN NAMES, SURNAME		
NATIONALITY		
D.O.B & PESEL (or ID no.)		
LEGAL GUARDIAN 2 HOME ADDRESS		
STREET and HOUSE NO.		
POST CODE, CITY		
ADDITIONAL INFO		
	LEGAL GUARDIAN 1	**LEGAL GUARDIAN 2**
TELEPHONE		
E-MAIL ADDRESS		
CHILD INFO		
GIVEN NAMES, SURNAME		
D.O.B & PLACE OF BIRTH		
NATIONALITY		
PESEL (or ID no.)		
FULL HOME ADDRESS		
PLANNED TIMES OF ATTENDANCE (10hrs max.)		

ADDITIONAL INFO ABOUT THE CHILD		
Do you give consent to a psychological or/and speech therapist assessment?		
Did the child attend a nursery/day care before?	YES	NO
Is the child monitored by any specialist care?		
Does the child have any disabilities?		
Is the child vaccinated?		
Any food allergies/special diet?		
Does the child have siblings?		
Any other relevant info, allergies, developmental defects, past infectious diseases, etc.		

PLANNED ADAPTATION START DATE	

(1) ……..……

…….. (2) ……..……

Date Parents/legal guardians signatures

ŻŁOBEK DINUSIOWO