

DAY CARE FACILITY FORM (KG1 – KG2)

I would like to enroll my child for Day Care facility. Date: _____

Name of the Student: _____ Grade: _____ Section: _____

Computer no.: _____ Day care from (Date): _____

Bus number: _____ Drop-off point: _____

Timings opted:

12pm to 2pm(Mon-Fri):
Fees: Dhs.315/- per (including VAT)

12pm – 4pm (Mon-Fri) :
Fees: Dhs.525/- per month (including VAT)

Please note that full month day-care charges will be applicable if the student uses the facility for two days or more.

Name of the Parent: _____

Tel Nos. Residence: _____ Office: _____

Mobile No. 1) _____ 2) _____

Email : _____ Signature of Parent: _____

DAY CARE FACILITY DISCONTINUATION

I would like to discontinue day care facility for my child. Date: _____

Name of the Student: _____ Grade: _____ Section: _____

Computer No.: _____ Day Care Discontinue From (Date): _____

Bus Number: _____ Drop_off point: _____

Name of the Parent: _____

Tel Nos. Residence: _____ Office: _____

Mobile no.1) _____ 2) _____

Email: _____ Signature of Parent: _____

FOR OFFICE USE ONLY:

Accounts: _____ Day Care Facility in-charge: _____ Class Teacher: _____

