



Provisional Enrolment

Child Surname, First Name(s)

Date of birth Mother tongue

Religious denomination Nationality

	Mother	Father
Surname		
First name		
Street		
Postal Code, Town		
Profession		
Employer		
Date of birth		
Rel. denomination		
Mother tongue		
Nationality		
Telephone / mobile (daytime)		
Telephone / mobile (evening)		
E-mail address		

Liability insurance

Accident-/ Health insurance

Pediatrician / Dentist

Vaccination

Additional Comments

Proposed admission date

Group 0 – 3 years

Desired days (min. 3 days) Monday Tuesday Wednesday Thursday Friday

Group 3 – 6 years

The registration fee of CHF 800.00 is due after MIC GmbH confirmed the child's acceptance.

I declare that I am acquainted of the principles of the Montessori pedagogy and agree to them. I have taken note of the costs to be expected (school fees specified in the parents information).

Place, date, signature of Father

Place, date, signature of Mother