

REGISTRATION FOR AFTER-SCHOOL CARE for the school year 2019/20
(Tagesbetreuung)

PLEASE TYPE CLEARLY IN CAPITAL LETTERS.

SCHULKENNZAHL: 401546

Student information:

Family name: _____ First name: _____

Social insurance number of student: _____ Class: _____

Liabie parent / legal representative:

Family name: _____ First name: _____ Title: _____

Postcode: _____ Town: _____ Street: _____

e-mail: _____ Telephone: _____

Information for fee assessment:

The relevant amount of the fees are listed in the parental information sheet.

Registration for separate sequence of teaching and after-school care part (afternoon care) is to be made for ____ weekdays, from September / February (if later acceptance at the school, from _____).

MON: TUE: WED: THU: FRI:

Please mark with a cross all the periods for which you wish to register your child.

	Monday	Tuesday	Wednesday	Thursday	Friday
periods	6 7 8 9 10	6 7 8 9 10	6 7 8 9 10	6 7 8 9 10	6 7 8

I will apply for a reduction of the fees (to be done separately) : YES NO

I am aware that this registration and the chosen days are reliable and binding and are valid for the whole school year and a change can only be accepted three weeks before the end of the first term.

Statement:

I accept the above conditions and declare, that I have received the parent information about day-long school types.

_____ Date

_____ Signature of liabie parent / legal representative

First registration and change in bank detail / account: please **only** fill in the SEPA direct debit form when first registering your child (when you have not filled one in before at this school) or if your bank details have changed.

period times:

1.period	7.50 – 8.40 am	5.period	11.40 am – 12.30 pm	9.period	15.20 – 16.10 pm
2.period	8.45 – 9.35 am	6.period	12.35 pm – 13.25 pm	10.period	16.15 – 17.05 pm
3.period	9.40 – 10.30 am	7.period	13.30 pm – 14.20 pm	11.period	17.10 – 18.00 pm
4.period	10.45 – 11.35 am	8.period	14.25pm – 15.15 pm		