



DAYCARE FORM

Please affix a recent passport size photograph of your ward

Registration No.

1. Name : Gender :
 Class : Date of Birth :
 Blood Group : Nationality :
 Residential Address :
 Tel. : (Landline with code): Mob:

2. Details of Parents/Guardians :

	Father's	Mother's
Name (In Block Letter):
Occupation:
Address (Office):
Educational Qualifications:
Tel. /Mobile No. :
E-mail address :

3. Kindly affix photograph of any two persons who will pick and drop the child :

- (a) Name :
 Address :
 Phone :

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- (b) Name :
 Address :
 Phone :

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4. Transport : Required Not required

5. Pick-up timing, if self:

6. Undertaking to act as Local Guardian (if any):

Iundertake to act as local Guardian of
Master/MissS/o / D/o Shri.....
studying in class.....in RPS International School.

7. Please mention the details :

- (a) Allergies, if any :
- (b) Medicines (to be avoided) :
- (c) Foods (to be avoided) :

8. Activities the child enjoys :

- (a) Physical :
- (b) Colouring :
- (c) Music :
- (d) Puzzles :
- (e) Others :

9. Any Special instructions:

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Undertakings from Parents :

I here by give an undertaking that in case of any sickness, particularly any infectious disease or any emergency, it will be my responsibility to keep the ward with me for the period as directed by the school authorities.

In case of any sickness, emergency school authorities have the responsibility to take the ward for medication if required, in case of delay after half an hour of reporting. Therefore, it was my responsibility to clear the dues for medication, if any.

Signature of Parents/Guardian