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## Vrindhavan Kindergarten Admissions Form

Please fill out and return to Tanja via email or in person.

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**Childs name**

\_\_\_\_\_

First Name

\_\_\_\_\_

Last Name

**Nationality**

**Passport Number**

\_\_\_\_\_

**Parent #1 name**

\_\_\_\_\_

First Name

\_\_\_\_\_

Last Name

**Parent #2 name, if applicable**

\_\_\_\_\_

First Name

\_\_\_\_\_

Last Name

**E-mail Address**

\_\_\_\_\_

**Telephone number**

\_\_\_\_\_

**Home Address**

\_\_\_\_\_

Street Address

\_\_\_\_\_

Street Address Line 2

\_\_\_\_\_

City

\_\_\_\_\_

State / Province

\_\_\_\_\_

Postal / Zip Code

\_\_\_\_\_

Country

**Telephone number in India**

\_\_\_\_\_

**Address in India**

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Street Address

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Street Address Line 2

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City

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State / Province

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Postal / Zip Code

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Country

**Length of stay with us****Emergency Contact Info**

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**Languages your child speaks and understands**

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**Personal info**

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**Photos**

We take photographs of children while doing activities in the Kindergarten. We do share them in our website and on Facebook. Please let us know if you agree with that.

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**photo permission**

Yes, I agree

No, I don't want my child identifiable in any photograph.

I have read and agree to Vrindhavan Kindergarten's policies.

Insurance

Your Child will stay with trained Kindergarten teachers and experienced ladies who will take every possible precaution and care to ensure your child's safety.

However, the operators are free from any liability, responsibilities arising from unforeseen circumstances beyond their control.

I have read the above and permit my child

**Childs name**

\_\_\_\_\_

First Name

Last Name

**Birth Date**

\_\_\_\_\_

Month

Day

Year

to visit Vrindhavan Kindergarten.

While appreciating your precaution, for safety and welfare of my child, I understand not to hold you responsible for any unforeseen circumstances.

**Date**

\_\_\_\_\_

Month

Day

Year

Signature of Parent \_\_\_\_\_