

Little Gems Pre-School



Registration form

Date:

Name of child (4 Parts):

Date of birth: Day: Month: Year:

Male / Female (please circle) **Nationality:**

Siblings at Aqaba International School (please specify name & grade)
.....

Mother's name: **Father's name:**

Residential address:

Email address:

Home telephone number:

Mother's mobile no.: **Father's mobile no.:**

Mother's company: **Telephone number:**

Father's company: **Telephone number:**

Any other Emergency contact:
Name Number Relationship.....

Any medical conditions/allergies:
.....

Registration fee of 100 JD paid on:
(Required in order to process the application, and it is not refundable or deductible from fees)

Requested start date:

Application Requirements:

- 1- Please provide 4 recent passport photos
- 2- Certified copy of family book (Jordanians only) or updated certified copy of valid residency card (non-Jordanian)
- 3- Certified copy of Birth certificate
- 4- Card and vaccination certificate

Name of Student:

Date of Birth:
 Nationality:
 Father's Name:
 Mother's Name:

Gender: M / F (Please circle)

Home Telephone	Mother's Office & Mobile	Father's Office & Mobile
.....
.....

Medical Conditions	Yes	No
Food Allergies (please specify):		
.....		
Other Allergies (please specify):		
.....		
Bronchial Asthma		
Congenital Heart Disease		
Diabetes		
Epilepsy		
Rheumatic Fever		
Surgical Operations (please specify):		
.....		

Consent:

1. I give permission to have the school nurse give the Non-prescription medicine, to my son/daughter in case of minor illnesses, such as stomach pain, fever, sore throat, etc.

Yes: **No:**

Kindly indicate if there is any medication is being taken and if your son/daughter will require it during school day.,,

3. I give permission to the school nurse to share with appropriate school personnel information relative to the prescribed medicine administration, e.g., adverse side effects, as she/he determines necessary for my son's/daughter's health and safety.

Yes: **No:**

4. In the case of emergency every effort will be made to contact you on the numbers given to us, if not possible your child will be taken to the nearest hospital, while we continue to contact you.

Signature of Parent/Guardian:Relationship to Student:

Date:

INDEMNITY FORM

I, of P.O. Box, being the lawful parent or guardian of hereby agree:

That Little-Gems Pre-School, or any teachers, or officials, or voluntary helpers of the school, shall have no responsibility of whatsoever nature in respect of bodily injury to the above child:

- 1) Prior to actual delivery of the said child into the custody of the said teachers or officials inside the preschool grounds, or after the child has been collected from the preschool grounds by a person authorized by me to do so, on a normal preschool day.
- 2) Whilst on preschool grounds outside the official opening times.
- 3) At any other time, unless the said child is in the direct custody or control of one of the said teachers whilst on a recognized outing or function arranged by the preschool.
- 4) Unless the injury is caused by, or resulting from:
 - a) The neglectful act or omission of any employee, teacher or other person or persons authorized to act for or on behalf of the said preschool.
 - b) Any defect on the premises of the said preschool.

In addition I agree:

- 5) to indemnify and keep indemnified the said preschool in respect of any amounts which the said preschool may pay, in respect of medical or other expenses arising from accidental bodily injury to the said child other than as set out in 4.
- 6) to indemnify and keep indemnified the said preschool in respect of any loss or damage to property belonging to or in the custody or control of the said preschool caused by the said child.

We acknowledge that the Pre-School’s rules, regulations and curriculum as well as its fee structure, change from time to time. Sometimes this is due to external factors such as change in the law, regulatory requirements or market conditions. We agree to such changes when the pre-school introduces them.

We understand that Little Gems Pre-school will provide a platform for students in an English speaking environment, so they can move on easily and achieve success at Aqaba International School. Therefore, we acknowledge and agree to all associated contents of delivered programs.

Name and address of Parent or Guardian:

.....

SignedDate

Name and address of Witness:

.....

SignedDate

I confirm that all the above information is true and correct. I understand and accept that if the information provided is false or misleading, and / or if I fail to pay pre-school fees, and / or if I or my immediate family fail to abide by Little Gems Pre-School rules, and / or I fail to provide all necessary paperwork; it is likely that my child will lose his/her place at Little Gems Pre-School

I understand that school fees are payable one term in advance to secure my child's place at Little Gems Pre-School.

Families wishing to withdraw their child must give one full term's notice in advance or forfeit one term's school fees.

Therefore, you will not receive any refund if you move your child to another school at the beginning of term without prior notification of at least one term.

I..... parent / legal guardian of
.....date of birth,

Have read and accept the terms and conditions of registration at Little Gems Pre-School in full and agree to abide by all Little Gems Pre-School rules and regulations in support of my child's education including pre school fee payment and supply of all approved uniform.

I understand that registration does not guarantee my child a place at Little Gems Pre-School and that interviews, admissions and class allocations are at the discretion of the Principal. I understand that Little Gems Pre-School does not operate a sequential waiting list and selects children who are considered to be most suitable for the style of international independent school education being offered at Little Gems Pre-School. Therefore, early application is highly recommended but does not necessarily guarantee my child a place at Little Gems Pre-School.

I attest that I fully understand and agree to the rules and regulations of Little Gems Pre-School's registration, teaching and collection policy.

I agree and attest that any notifications delivered to me through Little Gems Pre-School's distribution mechanism shall be considered as delivered, informed and notified to me.

I agree that Little Gems Pre-School shall have the right of raising the preschool fees without any prior notice, and that I shall abide by such raise. Further, I fully attest that I waive all my rights of not complying to the fees raise.

I understand that there will be no need to exchanging any notary admonitions in connection to this contract, and that I waive all my rights of claiming such.

I understand that any dispute arising from or related to this contract shall be settled by way of litigation, and that the Central Court of Amman shall have the sole jurisdiction to resolve such dispute.

Signature Date