



Affix Child's
Photograph

REGISTRATION FORM

Date of Admission: ____ - ____ - ____ dd - mm - yyyy	Session: <input type="checkbox"/> AM (8.30 am to 11.30 am) <input type="checkbox"/> PM (12.00 pm to 3.00 pm)	Level: <input type="checkbox"/> N1 (3 years old) <input type="checkbox"/> N2 (4 years old) <input type="checkbox"/> K1 (5 years old) <input type="checkbox"/> K2 (6 years old)	Class: <i>For Official Use Only</i>
(1) Child's Particulars		Student ID: <small>For Official Use only</small>	S
Full Name (as in birth cert): <i>please underline surname/ family name</i>			Chinese Characters: <i>if applicable</i>
Birth Certificate No/ FIN No:			Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
Date of Birth: ____ - ____ - ____ dd - mm - yyyy	Place of Birth:		Race:
Address: Block/ House No: _____ Floor/ Unit No: # _____ - _____ Street: _____ Building: _____ Postal Code: _____			Nationality/ Citizenship: <input type="checkbox"/> Singaporean <input type="checkbox"/> Singapore PR <input type="checkbox"/> Foreigner _____
Residence Tel. No.:		Language(s) spoken at home: <input type="checkbox"/> English <input type="checkbox"/> Chinese <input type="checkbox"/> Others _____	
Religion: <input type="checkbox"/> Christianity <input type="checkbox"/> Buddhism <input type="checkbox"/> Hinduism <input type="checkbox"/> Islam <input type="checkbox"/> Others _____			
School last attended: <i>if applicable</i>			
(2) Parents' / Guardian's Particulars			
	Father / Guardian	Mother / Guardian	
Full Name:			
NRIC/ FIN No:			
Nationality/ Citizenship:	<input type="checkbox"/> Singaporean <input type="checkbox"/> Singapore PR <input type="checkbox"/> Foreigner _____	<input type="checkbox"/> Singaporean <input type="checkbox"/> Singapore PR <input type="checkbox"/> Foreigner _____	
Race:			
Ethnic/ Dialect Group:			
Occupation:			
Name of Company:			
Office Tel No:			
Mobile No:			
Email address:			
Religion:	<input type="checkbox"/> Christianity <input type="checkbox"/> Buddhism <input type="checkbox"/> Hinduism <input type="checkbox"/> Islam <input type="checkbox"/> Others _____	<input type="checkbox"/> Christianity <input type="checkbox"/> Buddhism <input type="checkbox"/> Hinduism <input type="checkbox"/> Islam <input type="checkbox"/> Others _____	
Church: <i>if applicable</i>			
Denomination:			
Highest academic qualification			
Parent ID: <small>For Official Use only</small>	P	P	
(3) In Case of Emergency, please contact			
Name of Person	Contact No.	Relationship to Child	
(1)			
(2)			

(4) Child's Medical History (please attach details where necessary)

Questions	Answers	If Yes, Please describe or elaborate. Please attach medical report if any.
1. Does your child have any allergies?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2. Does your child have any special needs?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3. Is there anything else about your child that the school should be aware of? (e.g. health problems, temperament of child or unusual family circumstances, etc.)	<input type="checkbox"/> Yes <input type="checkbox"/> No	

(5) Priority Registration (if applicable)

1. Sibling is currently in BRMCK <i>Write name, current class/level/session</i>	
2. Either parent or older sibling was an ex-student of BRMCK. <i>Write name/s & indicate year of graduation & attach graduation certificate.</i>	

(6) Miscellaneous

1. How did you come to know about Barker Road Methodist Church Kindergarten? <input type="checkbox"/> Advertisement <input type="checkbox"/> Friends/Relatives <input type="checkbox"/> MOE/ECDA website <input type="checkbox"/> Others _____
2. Do you allow BRMCK to use photographs and/or video clips of your child? <input type="checkbox"/> Yes <input type="checkbox"/> No

(7) Mode of Payment for Subsequent School Fees

<input type="checkbox"/> CDA (Baby Bonus) <input type="checkbox"/> GIRO <input type="checkbox"/> Cheque

(8) Requirements

No	Items	Remarks
1.	Completed Registration Form	With parents' signature
2.	Child's Passport Size Photo	Quantity: 1
3.	Copy of your Child's Birth Certificate	Where applicable: Copy of Singapore Citizenship Certificate / Copy of Singapore Permanent Resident Supporting Documents / Copy of Passport / Dependent Pass / Diplomat Pass
4.	Copy of your Child's Immunisation Record	Found in health booklet
5.	Copy of Parents' Identity Cards	Where applicable: Copy of Parents' Passport/ Employment Pass/ Dependent Pass
6.	Signed School Copy of BRMCK Rules and Regulations	With parents' signature on every page
7.	GIRO or *CDA application form <i>(All application forms MUST be completed in ink and any amendments MUST BE COUNTERSIGNED by parent account holder. No correction fluid is allowed to be used on the form. Application will take 4-6 weeks to process by the bank)</i>	*An administrative fee of (SGD\$50 + prevailing GST) is chargeable for each new CDA application. NB: Change of Bank for CDA is considered a new application. In the event of any failed Giro/CDA deduction, an administrative charge of SGD\$75.00 shall be levied on the 2nd attempt and any other subsequent Giro/CDA deduction.
8.	Copy of monthly CDA Bank Statement for CDA application	NB: CDA cannot be used to pay for enrichment class term fees
9.	School Term Fees: Payment via A/C Payee Only Cheque addressed to: BARKER ROAD METHODIST CHURCH KINDERGARTEN	Initial School Term Fees Payable during registration is to be paid via cheque only. Subsequent term fees may be paid via GIRO/CDA. Parents may apply for GIRO/CDA during registration.

AGREEMENT & ACKNOWLEDGEMENT:

I/We hereby solemnly confirm that all the information stated in this form is correct and authentic. I/We have read and understood the **Rules & Regulations of Barker Road Methodist Church Kindergarten (BRMCK)** and agree to abide by the rules, regulations, programme, requirements and any other amendments or variations that may be made known to parents/guardians from time to time. By submitting all personal data listed on the form, I/we consent to BRMCK collecting, using, disclosing and/or processing my/our personal data for the purpose of my/our child's registration with the kindergarten and when my/our child has been successfully enrolled in the kindergarten. I/We hereby authorize BRMCK to store and use our personal data and our child's personal data and photo images as BRMCK deems fit.

We are **fully aware** that BRMCK is a Church Based Christian Preschool and that the Gospel of Christ will be shared. We agree for our child/children to participate in the preschool's daily devotion and worship programme and any other church based related celebratory events.

We agree that NO REFUNDS whatsoever under all circumstances in the event of NO SHOW and/or CHANGE OF MIND for child to attend BRMCK in January of the new school academic year and/or scheduled date of admittance as per parents' request, unless 3 months' written notice is given. All Verbal and/or Telephone withdrawals will not be processed. This is strictly not negotiable.

Name of Parent/Guardian: _____ NRIC No: _____

Signature of Parent/ Guardian

Relationship to Child

Date

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