

Enrolment form - Wednesday Workshops Boucaniers - <u>18-36</u> months - 2025/2026

Boucaniers, 14a chemin des Rays, 1222 Vesenaz

| In Commune / Out of Commune | | | |
|--|-------------|----------------------------|----------------|
| I, the undersigned, Parent 1 Father □ Mother □ | | Parent 2 Father □ Mother □ | |
| | | | |
| Surname: | | Surname: | |
| First name: | | First name: | |
| Marital status: | | Marital status: | |
| Address: | | Address: | |
| Post code & town: | | Post code & town: | |
| Tel home: | | Tel home: | |
| Tel mobile: | | Tel mobile: | |
| Profession: | | Profession: | |
| Tel work: | | Tel work: | |
| Email: | | Email: | |
| would like to enrol my child(ren), aged <u>18-36</u> months: | | | |
| Surname: | First name: | | DATE OF BIRTH: |
| Surname: | First name: | | DATE OF BIRTH: |
| Surname: | First name: | | DATE OF BIRTH: |
| school, 14a chemin des Rayes, 1222 Vésenaz (please select the desired sessions below): for the 1 st term (from September to December 2025) for the 2 nd term (from January to March 2026) for the 3 rd term (from April to June 2026) for the school year (from September 2025 to June 2026) Payment frequency: | | | |
| Each term 🛚 | | Annual 🗆 | |
| Does your child/do your children, speak French? (please circle) yes no If no, which languages does your child/do your children, speak at home? Workshops are organised by theme and term. Themes fall into three categories: 1. Creative workshops (painting, modeling, craft, cooking, etc.) 2. Movement workshops (rythmical, psychomotricity, relaxation, danse, etc.) 3. Expression workshops (songs, stories, puppets, mime, etc.) Notes: | | | |
| I declare that the above information is correct and that any changes will be communicated as soon as possible | | | |

Date : _____

Signature: