



Enrolment form - Bacounis 2022/2023

101 route d'Hermance, 1245 Collonge-Bellerive

'In' Commune / 'Out of' Commune

I, the undersigned,

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),

Surname:	First name:
Date of birth:	Nationality:
Girl <input type="checkbox"/> Boy <input type="checkbox"/>	Enroled last year with: Bacounis <input type="checkbox"/> / Boucaniers <input type="checkbox"/>

... in the group (please select the desired sessions below):

Mornings: Monday, Tuesday, Thursday, Friday from 8h00 to 11h45	Afternoons: Monday, Tuesday, Thursday, Friday from 13h30 to 17h15
Playgroup/Nursery School: 2-4 years <input type="checkbox"/>	Playgroup/Nursery School: 2-4 years <input type="checkbox"/>
Playgroup: 2-3 years <input type="checkbox"/>	Parent & Baby Group: Thursdays only from 14h00 to 17h00 - please request separate enrolment form

N.B. During the course of the year, the management reserves the right to modify the age groups based on member needs.

Additional information:

Child's health insurance provider	
Child's accident insurance provider	
Child's civil liability/3rd party insurance provider	
Name, address & telephone number of child's paediatrician	

Payment frequency:

Each term <input type="checkbox"/>	Annual <input type="checkbox"/>
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Notes:

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I declare that the above information is correct and that any changes will be communicated as soon as possible

Name : _____ Date : _____ Signature : _____