



St. James' Church Kindergarten (Leedon)

1 Leedon Road, S. 267828 · Tel: 62197246 · Fax: 64684770 · Email: leedon@sjck.org.sg · Website: www.sjck.org.sg

REGISTRATION FORM

Session: First (8.15 am – 11.15 am)
 Second (11.30 am – 2.30 pm)

Level/Year: Pre-Nursery _____ Kindergarten 1 _____
 Nursery _____ Kindergarten 2 _____

1. CHILD'S PARTICULARS

Name (as in birth cert.)			
Chinese characters		Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
Birth cert. no. / FIN no.		Citizenship	
Date of birth (dd/mm/yy)		Race	
Expected Due Date (dd/mm/yy) (A copy of the Birth Cert to be emailed to the school upon availability)			
Address		Tel. no. (home)	

2. PARENTS' / GUARDIAN'S PARTICULARS

	Father / Guardian	Mother / Guardian
Name		
NRIC No. / FIN No.		
Date of Birth		
Citizenship		
Marital Status	Married / Separated / Divorced / Single Parent	Married / Separated / Divorced / Single Parent
Occupation		
Name of Company		
Tel. no. (office)		
Mobile no. (Please tick on a preferred contact for emergency SMS from SJCK)	<input type="checkbox"/>	<input type="checkbox"/>
Email address		
Religion	Buddhism / Christianity / Hinduism / Islam / Others:	Buddhism / Christianity / Hinduism / Islam / Others:
Church (if attending)		

3. EMERGENCY CONTACT (Other than parents)

Name of person		Contact no.		Relationship to child	
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4. CHILD'S MEDICAL HISTORY (Please attach details where necessary)

Does your child have any medical conditions/special needs? If yes, please elaborate or attach medical report.	
Does your child have any long term medication? <input type="checkbox"/> No <input type="checkbox"/> Yes. If yes, please elaborate	

5. AUTHORISED PERSONNEL TO PICK-UP CHILD (in addition to Parents'/Guardians' contact provided above)

Name		NRIC / FIN no.	
Contact no.		Relationship to child	
Name		NRIC / FIN no.	
Contact no.		Relationship to child	
Name		NRIC / FIN no.	
Contact no.		Relationship to child	

In case of emergency, I hereby approve the above mentioned contact(s) to pick up my child from St James' Church Kindergarten (Leedon).

Approve

6. PRIORITY REGISTRATION (If applicable)

1. Sibling is currently in SJCK (Harding/Leedon/Gilstead) Write name, current class, campus & year.	
2. Either parent is a member of our partner-churches Write name/s of member, partner-churches & attach church membership document/s & pastor's letter.	
3. Either parent or older sibling was an ex-student of SJCK or Little Seeds Preschool Write name/s & indicate year of graduation & attach graduation certificate.	

7. MISCELLANEOUS

How did you come to know about St. James' Church Kindergarten?

Advertisement Friends MOE Website Relatives Others

Is your child registered at other St. James' Church Kindergarten campuses?

Yes (Gilstead / Harding) No

Does your child require school bus transport?

Yes No

8. REQUIREMENTS

- 1) Copy of child's birth certificate / medical document of unborn child's EDD
- 2) Copy of child's passport/visit pass/dependant's pass/student pass (for non-Singapore citizen)
- 3) Copy of parents' identity cards
- 4) Non-refundable \$60.00 registration fee (Cheque to be made payable to **St. James' Church Kindergarten**)
- 5) \$500 deposit (upon confirmation)
- 6) CDA/GIRO application form

AGREEMENT

By submitting all personal data listed on the form, you consent to St. James' Church Kindergarten collecting, using, disclosing and/or processing your personal data for the purpose of your child's registration with the Kindergarten and when your child has been successfully enrolled in the Kindergarten. Such personal data includes information about you and your family as set out in the registration form and documents and any other personal information you have provided.

I declare that the information provided is accurate. I have read the School Handbook and the Policies for Admissions & Fees Handbook and agree to abide by the rules, regulations, programme and requirements of St. James' Church Kindergarten.

Name of father / mother / guardian

Signature & date

FOR OFFICE USE ONLY

Processed By:	Authorised By:
Date:	Date:
Remarks:	