



ENROLLMENT FORM –
KARTA ZGŁOSZENIA DZIECKA
ŻŁOBEK DINUSIOWO
UL. WROCŁAWSKA 87

DINUSIOWO

PARENTS/LEGAL GUARDIANS		
LEGAL GUARDIAN 1		
GIVEN NAMES, SURNAME		
NATIONALITY		
D.O.B. & PESEL (or ID no.)		
LEGAL GUARDIAN 1 HOME ADDRESS		
STREET and HOUSE NO.		
POST CODE, CITY		
LEGAL GUARDIAN 2		
GIVEN NAMES, SURNAME		
NATIONALITY		
D.O.B & PESEL (or ID no.)		
LEGAL GUARDIAN 2 HOME ADDRESS		
STREET and HOUSE NO.		
POST CODE, CITY		
ADDITIONAL INFO		
	LEGAL GUARDIAN 1	LEGAL GUARDIAN 2
TELEPHONE		
E-MAIL ADDRESS		
CHILD INFO		
GIVEN NAMES, SURNAME		
D.O.B & PLACE OF BIRTH		
NATIONALITY		
PESEL (or ID no.)		
FULL HOME ADDRESS		
PLANNED TIMES OF ATTENDANCE (10hrs max)		

ADDITIONAL INFO ABOUT THE CHILD		
Do you give consent to a psychological or/and speech therapist assessment?		
Did the child attend a nursery/day care before?	YES	NO
Is the child monitored by any specialist care?		
Does the child have any disabilities?		
Is the child vaccinated?		
Any food allergies/special diet?		
Does the child have siblings?		
Any other relevant info, allergies, developmental defects, past infectious diseases, etc.		
PLANNED ADAPTATION START DATE		

(1)

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(2)

Date

Parents/legal guardians signatures

