



Registration Form

ENG-03/2017

Section 1: STUDENT'S PERSONAL DETAILS

Name			
Date of birth	<i>(year)</i>	<i>(month)</i>	<i>(day)</i>
Personal ID No.		Passport No.	
Enrollment at	<input type="checkbox"/> Kindergarten <input type="checkbox"/> International program <input type="checkbox"/> Dual language program		
Academic year		Grade	
Expected starting date at AEA		Expected leaving date	

Section 2: PARENT'S DATA

Parent's name	
Relationship to the student	
Personal details as per ID card or passport	
Mobile	
Email	

Section 3: CONTACT INFORMATION

First person to be contacted by the school administration	
Relationship to the student	
Mobile	
Email	

Second person to be contacted by the school administration	
Relationship to the student	
Mobile	
Email	

Third person to be contacted in case of emergency (besides the parents)	
Relationship to the student	
Mobile	
Email	

Section 4: DECLARATION FOR MEDICAL AUTHORIZATION

By signing this declaration I give my consent in case of emergency my child

(name of the student)

to receive medical care provided by medical specialists, when under the supervision of the staff of the American English Academy, Abraham Lincoln Private School or Little Eagles Kindergarten.

Signature of parent/guardian

Date

Signatory's name: _____

Signatory's relation with the student: _____

Section 5: DECLARATION AUTHORIZATION FOR DEPARTURE

By signing this declaration I do hereby declare that I give my consent my child

(name of the student)

to be picked up from the American English Academy, Abraham Lincoln Private School or Little Eagles Private Kindergarten

by the driver of the school bus

by the following individuals

Name	Relationship to the student

to go home alone without supervision

Signature of parent/guardian

Date

Signatory's name: _____

Signatory's relationship to the student: _____

Section 6: FILMING/ PHOTOGRAPHY DECLARATION

By signing this declaration I do hereby declare that I agree my child to be photographed or filmed while on the territory of the American English Academy, Abraham Lincoln Private School, or Little Eagles Kindergarten. I agree the created photographs and video materials to be used for school's yearbook, website, leaflets, brochures, etc.

Signature of parent/guardian

Date

Signatory's name: _____

Signatory's relationship to the student: _____

Section 7: DECLARATION OF CONSENT

I hereby acknowledge that I have been informed about my obligation to provide additional documents related to my child's admittance to the American English Academy in accordance with the school's enrollment procedure for the respective age group or grade. I declare my consent to submit all documentation required within the given deadline.

I have received a copy of the AEA Admissions Policy.

Signature of parent/guardian

Date

Signatory's name: _____

Signatory's relationship to the student: _____

Section 8: STUDENT'S AREAS OF INTEREST

Please specify student's areas of interest.

Sports

Arts and crafts

Music

Drama

Math

Science

Social studies

Languages

Other

Section 9: SCHOOL MEALS

Please specify if you would like to register your child for the *AEA Health & Nutrition Program*. Note that registration is required only for students in Grades 1-12 and school meals are charged additionally. School meals are provided for all kindergarten students and no registration is needed.

Please be informed that students from Grades 1-12 travelling with the morning school bus cannot be registered for breakfast meals at AEA.

Breakfast

Breakfast and lunch

Lunch

I will decide later

Food allergies

Section 10: SCHOOL UNIFORM

Please be informed that the AEA uniform set includes five elements: (a) two long sleeved t-shirts, (b) two short sleeved t-shirts, (c) sleeveless sweater, (d) vest, and (e) sweatshirt.



Please specify the expected height of your child (in centimeters) as of their first day of school at AEA.

- | | | | | | |
|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|
| <input type="checkbox"/> 92 cm | <input type="checkbox"/> 110 cm | <input type="checkbox"/> 128 cm | <input type="checkbox"/> 146 cm | <input type="checkbox"/> 164 cm | <input type="checkbox"/> 182 cm |
| <input type="checkbox"/> 98 cm | <input type="checkbox"/> 116 cm | <input type="checkbox"/> 134 cm | <input type="checkbox"/> 152 cm | <input type="checkbox"/> 170 cm | <input type="checkbox"/> 188 cm |
| <input type="checkbox"/> 104 cm | <input type="checkbox"/> 122 cm | <input type="checkbox"/> 140 cm | <input type="checkbox"/> 158 cm | <input type="checkbox"/> 176 cm | |

I will submit this information later

Section 11: AGREEMENT FOR EDUCATIONAL SERVICES

Please specify the requested details regarding the Agreement for educational services. Please note that student's registration is valid for a period of one month. Within this period parents are invited to sign an Agreement for educational services between the school and themselves. **Please be informed that registration is cancelled and the reserved place is announced open if the Agreement for educational services is not signed within the given time frame.**

What is your preferred language of the text of the Agreement?
<input type="checkbox"/> English <input type="checkbox"/> Bulgarian
What is the second contractual party to the Agreement for educational services?
<input type="checkbox"/> Natural person (student's parent) <input type="checkbox"/> Juridical person (company/embassy)
Please specify the payment schedule of your choice. <i>(Note that optional payment schedules are available only for new students enrolled until March 31)</i>
<input type="checkbox"/> Payment plan 1: Standard payment plan <i>First installment: 20 % due within the month of enrollment</i> <i>Second installment: 30 % due by August 31 prior to the start of the respective school year</i> <i>Third installment: 50 % due by January 15 during the respective school year</i>
<input type="checkbox"/> Payment plan 2: Early enrollment payment plan A (10 % reduction of the annual tuition) <i>First installment: 40 % due within the month of enrollment</i> <i>Second installment: 30 % due by August 31 prior to the start of the respective school year</i> <i>Third installment: 30 % due by December 31 during the respective school year</i>
<input type="checkbox"/> Payment plan 3: Early enrollment payment plan B (20 % reduction of the annual tuition) <i>First installment: 10 % due within the month of enrollment</i> <i>Second installment: 90 % due by March 31 prior to the start of the respective school year</i>

Section 12: TRANSPORTATION SERVICE APPLICATION

Please be informed that the AEA school bus service is provided by BG Trans Ltd. The transportation service is delivered in accordance with the AEA Transportation Policy. Please note that the AEA school bus service is an optional extra and the school administration cannot guarantee in advance that all applications will be approved. All transportation service applications will be reviewed and processed by the transportation company and parents will be notified of the outcome 7-10 days before the start date of travel. Parents of approved applicants will be invited to sign an Agreement for transportation service. Please be informed that the school transport is charged additionally.

Please specify whether you would like to apply for school transport.

- My child will not be using school transport
- I will decide later whether I will apply for the school transportation service
- I would like to register my child for the school transportation service

Please check the preferred transportation schedule below.

- One-way to school (AM)
- One-way from school (PM)
- Round trip bus

Please specify the start date of travel.

(dd/mm/yyyy)

Please specify the address from which your child will be picked up in the morning.

Please specify the address to which your child will be transported in the afternoon.

Please specify who will meet your child in the afternoon.

- My child will be met by a parent
- My child should be left at the appointed place and will not be met by a parent or other adult
- Other, please specify _____

Please specify if you have plans to register your child for after-school activities.

- I will register my child for after-school activities
- I will not register my child for after-school activities
- I will decide later

Please specify your preferred daily departure schedule. Please note that all timings are tentative.

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<input type="checkbox"/> 3:10 p.m.	<input type="checkbox"/> 3:10 p.m.	<input type="checkbox"/> 3:10 p.m.	<input type="checkbox"/> 3:10 p.m.	<input type="checkbox"/> 3:10 p.m.
<input type="checkbox"/> 4:40 p.m.	<input type="checkbox"/> 4:40 p.m.	<input type="checkbox"/> 4:40 p.m.	<input type="checkbox"/> 4:40 p.m.	<input type="checkbox"/> 4:40 p.m.
<input type="checkbox"/> 6:00 p.m.	<input type="checkbox"/> 6:00 p.m.	<input type="checkbox"/> 6:00 p.m.	<input type="checkbox"/> 6:00 p.m.	<input type="checkbox"/> 6:00 p.m.

Section 13: PARENT'S COMMENTS

Please provide any additional information which you consider important in regard to your child's education at the American English Academy.

Signature of parent/guardian

Date

Signatory's name: _____

Signatory's relationship to the student: _____

FOR OFFICE USE ONLY

Registration date:

(dd/mm/yyyy)

Validity of registration:

(dd/mm/yyyy)

School meals:

Yes (B/L/BL)

No

TBD

Transportation:

Yes (AM/PM/RT)

No

TBD

Agreement details:

Language (BG/ENG)

Contractual party (N/J)

Payment plan (S/10/20)

Comments:

Director of Admissions:

Date:

(dd/mm/yyyy)