



Registration Form

ENG-01/2021

Section 1: STUDENT'S PERSONAL DETAILS

Name in Latin letters	<i>(Please transcribe student's full name in Latin letters as per their official ID documents)</i>		
Name in Cyrillic letters	<i>(Bulgarian citizens only, please transcribe student's full name as per their official ID documents or Birth Certificate)</i>		
Date of birth	<i>(day)</i>	<i>(month)</i>	<i>(year)</i>
Citizenship	<i>(Please list every citizenship that your child has acquired)</i>		
Personal ID No.		Passport No.	
Enrollment at	<input type="checkbox"/> Kindergarten (K3-K4) <input type="checkbox"/> International program <input type="checkbox"/> Dual language program		
Academic year		Grade	
Expected starting date		Exp. leaving date	

Section 2: PARENT'S DATA

Mother's name	
Citizenship	<i>(Please list every citizenship that you have acquired)</i>
Mobile	
Email	

Father's name	
Citizenship	<i>(Please list every citizenship that you have acquired)</i>
Mobile	
Email	

Section 3: CONTACT INFORMATION

First person to be contacted by the school administration	
Mobile	
Email	

Second person to be contacted by the school administration	
Mobile	
Email	

Third person to be contacted in cases of emergency (besides the parents)	
Mobile	
Email	

Section 4: DECLARATION FOR MEDICAL AUTHORIZATION

By signing this declaration I give my consent in case of an 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 or Abraham Lincoln Private School.

Signature of parent/guardian

Date

Signatory's name: _____

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 or Abraham Lincoln Private School

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: _____

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 or Abraham Lincoln Private School. 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: _____

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: _____

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 K6 to Grade 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 K6-Grade 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: 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?

English

Bulgarian

What is the second contractual party to the Agreement for educational services?

Natural person (student's parent)

Juridical person (company/embassy)

Section 11: 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.				
<input type="checkbox"/> My child will be met by a parent <input type="checkbox"/> My child should be left at the appointed place and will not be met by a parent or other adult <input type="checkbox"/> Other, please specify _____				
Please specify if you have plans to register your child for after-school activities.				
<input type="checkbox"/> I will register my child for after-school activities <input type="checkbox"/> I will not register my child for after-school activities <input type="checkbox"/> I will decide later				
Please specify your preferred daily departure schedule. Please note that all timings are tentative.				
MONDAY <input type="checkbox"/> 2:50 p.m. <input type="checkbox"/> 4:30 p.m.	TUESDAY <input type="checkbox"/> 2:50 p.m. <input type="checkbox"/> 4:30 p.m.	WEDNESDAY <input type="checkbox"/> 2:50 p.m. <input type="checkbox"/> 4:30 p.m.	THURSDAY <input type="checkbox"/> 2:50 p.m. <input type="checkbox"/> 4:30 p.m.	FRIDAY <input type="checkbox"/> 2:50 p.m. <input type="checkbox"/> 4:30 p.m.

Section 12: 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: _____

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)