

Student Application Form

2 recent passport sizeBirth Certificate of theFather's Identification	Card for Malaysians	Passport-size photo			
☐ Mother's Identification	of child				
Programme Selection:					
Please mark (X) the programm	e you wish to enrol your child in:				
Daily morning program					
Half day program					
Full day program	ll day program :8.00am to 5.00pm (1 lunch and 2 breaks)				
Date of joining Westlake Chil	dcare Centre:(please state)			
Section A: Child's Particulars	S				
Name:		· · · · · · · · · · · · · · · · · · ·			
Address:		·			
Age:(years)	(months) Date of Birth:				
Position in the family:					
Siblings (if any):					
Name:	(age)				
Name:	(age)				
Name:	(age)				
Name:	(age)				



Section B: Father's Particulars						
Name:						
Profession:						
Home Address: (if different from	n child)					
Tel no:	(home)	(office)	(mobile)			
Email address:						
Section C: Mother's Particula	nrs					
Name:						
Profession:						
Home Address: (if different from	n child)					
Tel no:	(home)	(office)	(mobile)			
Email address:						
Parent marital status: r	narriedsepa	rated/divorcedWidowed	other			
Section D: Emergency Contact Details						
In case of Emergency, please p	provide valid information	on below.				
Name:			····			
Relationship to child:						
Relationship to mother / father:						
Tel no :	(home)	(office)	(mobile)			



Section E: Child Health and Personal Information Record				
Has the child any allergies? If yes, please state:	Y/N*			
Is child allergic to any food group? If yes, please state:	Y/N*			
Does child have frequent coughs and colds? If yes, please state:	Y/N*			
Has child had any serious accidents? If yes, please state:	Y/N*			
Has the child had playground experience before? If yes, please state where:	Y/N*			
Does child have a pet at home? If yes, please state:	Y/N*			
Do you spend time reading to your child at home? If yes, please state favourite book / books:	Y/N*			
Does your child have any special needs / disabilities If yes, please provide us with more information:				
Please add any comments that you feel will help us	s know your child better.			



Section F: Parent Declaration

I have received a copy of the centre's policies and procedures and agree to follow them in their entirety.

I agree to pay the amount due in advance for the time the child is enrolled. I understand that all charges are payable by the 7th of every month.

I understand that I may withdraw my child by giving one month's notice to the principal / coordinator of the centre.

I certify that the above information provided is true and accurate. Failure to provide true and accurate information may result in the center withdrawing the enrolment of my child.

NAME		SIGNATURE	RELATIONSHIP TO CHILD	DATE
Section G: For Office Use	Only			
	, Cy			
Fees / Charges Applicable:				
Enrolment Fee (payable once upon enrolment)	: RM			
School Fee	: RM	(Month :)	
Material Fee	: RM	per year		
Day Bed	: RM	(compulso	ry for full day student)	
Deposit	: RM			
Total	: RM			
AMOUNT PAID	: RM	CASH / C	HEQUE NO	-
	DATE	Received	d by	-
	RM	CASH / 0	CHEQUE NO	-
	DATE	Received		-
DATE ENROLLED	:			
DATE WITHDRAWN				