



# One World Nursery & School

## Registration form

Year: \_\_\_\_\_

### PARENT INFORMATION

Surname: \_\_\_\_\_

First name: \_\_\_\_\_

Relation to child: \_\_\_\_\_

Address: \_\_\_\_\_

Post/zip code: \_\_\_\_\_

City: \_\_\_\_\_ Country: \_\_\_\_\_

Billing address (if different): \_\_\_\_\_

Post/zip code: \_\_\_\_\_

City: \_\_\_\_\_ Country: \_\_\_\_\_

Telephone (home): \_\_\_\_\_

Mobile: \_\_\_\_\_

Work: \_\_\_\_\_

Email: \_\_\_\_\_

### COURSE INFORMATION

Preferred start date: \_\_\_\_\_ Not available

	MON			TUES			WEDS*		THURS			FRI		
	AM	PM	FD	AM	PM	FD	AM	PM	AM	PM	FD	AM	PM	FD
NURSERY 1 BI														
NURSERY 2														
PRIMARY 1														
P2 & P3														

\* A 5th day Young Learners (3 hour) class can be offered to Nursery 2 and Primary students, subject to availability and suitability for your child. Please see the head of Nursery & Primary for more information

### ADDITIONAL OPTIONS

I am interested in:

Early doors breakfast      Extra lunch sessions      After school club  
(Nursery 2 & Primary only)

### PAYMENT DETAILS

I wish to pay:

Per term      Per year (to be paid in full at the beginning of the year)

### DATA PROTECTION

- In enrolling with Bell Switzerland SA (Bell), you are agreeing to the storage and use of any student or personal information you provide for Bell's purposes only.
- Bell will only share your personal details with third party providers who are contracted to provide a specific service on behalf of Bell and require the information to perform their function (eg student platforms, examination centres).
- Bell will pass on your details to Swiss government agencies if requested by them to do so. We will not pass any personal details on to any other third party or organisation.
- You can find details of the Bell Data Protection Policy at [www.bellenglish.com/legal-notice/](http://www.bellenglish.com/legal-notice/)

Please email this form to: [nursery@bell-school.ch](mailto:nursery@bell-school.ch)

Bell Switzerland, Chemin des Colombettes 12, 1202, Geneva Tel: +41 22 749 16 00

### STUDENT INFORMATION

Child's surname: \_\_\_\_\_

Child's first name: \_\_\_\_\_

Male      Female      Age (today): \_\_\_\_\_

Date of birth (day/month/year): \_\_\_\_\_

Language spoken at home: \_\_\_\_\_

Do you have any other children?      Yes      No

Can your child go to the toilet unassisted?      Yes      No

Does your child have any special dietary needs?      Yes      No  
If so, please give details: \_\_\_\_\_

Does your child have any allergies?      Yes      No  
If so, please give details: \_\_\_\_\_

Does your child have any health or developmental problems or concerns?      Yes      No  
If so, please give details: \_\_\_\_\_

Has your child ever attended another nursery or playgroup?      Yes      No  
If so, please give details: \_\_\_\_\_

### OTHER INFORMATION

Please give details of any other important information

### SIGNATURE

Signature: \_\_\_\_\_

Date: \_\_\_\_\_