



# Life Childcare Centre

A ministry of Life Care Society

138 Prinsep Street Singapore 188659 | Tel: 6789 8228

<b>Class Level :</b> _____	<b>Pupil Registration Form</b>
<b>Programme: <u>Half-day / Full-day</u></b>	<b>Start Date:</b> _____

<b>PART A: Child's Particulars 幼儿资料</b>	
<b>Full Name as in Birth Certificate 名:</b>	
<b>Chinese 中文:</b>	<b>Race 种族:</b>
<b>Date of Birth : 出生日期:</b>	<b>Gender:</b> Male 男 / Female 女
<b>Birth Certificate/ Fin/ Passport No.:</b>	<b>First Language 第一语言:</b>
<b>Address 地址:</b>	



<b>PART B: Parent's Particulars 家长资料</b>					
<b>Father</b>			<b>Mother</b>		
<b>Full Name as in IC 名:</b>			<b>Full Name as in IC 名:</b>		
<b>NRIC/FIN No. 身份证号码:</b>			<b>NRIC/FIN No. 身份证号码:</b>		
<b>Home Address 家庭住址 (if different from above):</b>			<b>Home Address 家庭住址 (if different from above):</b>		
<b>Home: 住家电话:</b>	<b>Handphone: 手机号码:</b>	<b>Office: 办公室电话:</b>	<b>Home: 住家电话:</b>	<b>Handphone: 手机号码:</b>	<b>Office: 办公室电话:</b>
<b>Occupation 职业:</b>		<b>Religion 宗教:</b>	<b>Occupation 职业:</b>		<b>Religion 宗教:</b>
<b>Email Address 电邮地址:</b>			<b>Email Address 电邮地址:</b>		

<b>PART C: Other Emergency Contacts 其它紧急联络方式</b>			
<b>Name 姓名:</b>		<b>Handphone 手机号码:</b>	
<b>Relationship to the child 与孩童的关系:</b>		<b>Relationship to the child 与孩童的关系:</b>	
<b>Address 地址:</b>		<b>Address 地址:</b>	
<b>Remarks 备注:</b>		<b>Remarks 备注:</b>	

Siblings currently studying in school: \_\_\_\_\_ Class Level: \_\_\_\_\_

I hereby certify that the above information as provided by me is true, complete and accurate to the best of my knowledge. I understand that my application will be confirmed, subject to the availability of places. Fees will be payable upon confirmation. 特此申明，本人所提供的上述资料尽我所知是真实、完整和准确的。我明白我的申请确认情况将视乎学额而定，费用将在申请确认后支付。

\_\_\_\_\_  
Name of Parent  
家长姓名

\_\_\_\_\_  
Signature of Parent  
家长签名

\_\_\_\_\_  
Date  
日期