

Name of the institution: _____



Stadt Rosenheim

Pre-registration _____ (month/year)

for preschool (ages 3-7years) nursery school (infants up to 3years) play group for toddlers
 parent-child-group after-school care club

pre-registration just for this institution _____
In case my child does not get a place, I would like to be added to the waiting list.

pre-registration for this institution (1) _____
If my child does not get a place, we would like to pre-register in the following institutions:

(2) _____, (3) _____ or

(4) _____ * .

* If we do not get a place in any of the institutions stated above we allow you to hand over our personal information to institutions with free places so they can contact us. (if undesired please cross out)

Note to /
execution to
child care
institution:

Copy to:

completed
when/who/how:

Personal data of the child _____ age at entry in Sept. 2021 _____ years _____ months

first name and last name of the child _____

date of birth _____ feminine masculine

address _____

disability / integration needs / assistance needs _____

Personal data of custodians

mother

full name _____

address _____

830 Rosenheim _____

country of origin/birth _____

phone number (reachable during the day) _____

e-Mail _____

father

full name _____

address _____

830 Rosenheim _____

country of origin/birth _____

phone number (reachable during the day) _____

e-Mail _____

