



Kathmandu Waldorf Kindergarten

KATHMANDU WALDORF SCHOOL PVT. LTD.

Ward No. 2, Sanepa, Lalitpur, Nepal.

Phone: +977-9823443574/ 01-5537226

www.kwschool.org

contact@kwschool.org

STUDENT REGISTRATION FORM 2022 - 2023

PERSONAL DETAILS OF CHILD

Name of Child					
Name to be known as				DOB	
Gender	Male		Female		Nationality

PREVIOUS SCHOOL DETAILS (if any)

Name of School					
City of School					
Years attended					

FAMILY DETAILS

Father's Name		DOB		Nationality	
Mother's Name		DOB		Nationality	
Brother's /Sister's Name		DOB		Nationality	
Brother's /Sister's Name		DOB		Nationality	
Brother's /Sister's Name		DOB		Nationality	

CONTACT DETAILS

Work Address				Telephone	
Organisation name				Telephone	
Home Address				Mobile	
Email (Father)				Mobile	
Email (Mother)				Mobile	
Father's Occupation					
Mother's Occupation					
Resident Of Nepal	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If No, Number of years you hope to stay in Nepal:		

DETAILS FOR EMERGENCY					
Name		Relation		Mobile	
Name		Relation		Mobile	
Name		Relation		Mobile	

OTHERS				
Any food allergies?	Yes		No	
please provide details:				

CONSENTS				
We consent to the use of our child's image/moving image by KWS (website , Brochure , Or social Media)	Yes		No	
We consent that our email id's can be shared with other parents.	Yes		No	
We have read and understood the fee policy	Yes		No	
I fully understand that in the event of a critical accident the staff at KWS would act "in Loco Parentis".	Yes		No	
We are aware of school policies and agree to abide by them <i>(The child should not wear any valuables to school and if otherwise the school will not be responsible for it. In case of any injury caused to your child, the school shall seek immediate medical assistance and also notify the parent, however, the school will not be liable for it.)</i>	Yes		No	

REGISTRATION DETAILS	
Registration Date	
Admission Date	

To the best of my knowledge, the above information is correct & I understand that the school offer is based on this information					
PARENTS NAME		SIGNATURE		DATE	

PLEASE SUBMIT:

1. Proof of Child's Nationality & Date of Birth by enclosing photocopies of passport and/or Birth Certificate.
2. A brief writeup about your child
3. House Location Map.

FOR OFFICIAL USE			
Admission fees Paid		Registration fees Paid	
Date of Admission		Name of Officer	
Signature and Date			