



### FRITIDS REGISTRATION FORM

Child's Name.....	Date of Birth.....
Child's Name.....	Date of Birth.....
Child's Name.....	Date of Birth.....
Home Address.....	
.....	
Home Telephone Number.....	
Father's Name .....	
Work Tel. No. ....	.....
Mother's Name .....	
Work Tel. No. ....	.....
<i>Please tick which service you want.</i>	
Morning Fritids only (07.30-9.00) <input type="checkbox"/>	Afternoon Fritids only (14.30-17.30) <input type="checkbox"/>
Morning and Afternoon Fritids <input type="checkbox"/>	
Date when you wish your child to begin Fritids .....	

I understand that once my child begins Fritids at The English School Gothenburg, I must give 2 months notice to withdraw him/her, and regardless of attendance, I am required to pay the fee for these 2 months.

Parent's Signature.....

Date.....