

## INFORMATION & REGISTRATION SHEET

Academic Year 2020/2021

### Kindly take note:

- Please fill up the document in capital letters. All fields are mandatory.
- Any changes to the following information during the school year must be brought to the school's notice.
- In case of an emergency or accident, an injured or sick student will be transported to the nearest hospital. The family will be informed at the earliest.
- This document has to be returned to **BUN BUN SEILER** or sent by email to **admin@lfim.in**.

Recent passport photo

### 1) THE STUDENT

First name	
Family name	
Grade applied	

Gender:  Male  Female

Date of entry at LFIM	Day	Month	Year
Date of birth	Day	Month	Year
Place of birth	City	Country	
Nationality			
Mother tongue			
Spoken languages			
Name of the previous school			
Address of the previous school			
Section attended in previous school			

Knowledge of French:  No knowledge  Beginner  Intermediate  Fluent

Knowledge of English:  No knowledge  Beginner  Intermediate  Fluent

- Does the student need to wear glasses in class:  Yes  No
- Does the student need to wear glasses during recreation time:  Yes  No

## 2) PARENTS OR LEGAL GUARDIANS

	FATHER
First name	
Last name	
Nationality	
Mother tongue	
Spoken languages	
Address	
Landline	
Mobile	
Email	
Occupation	
Company	

	MOTHER

## 3) PAYMENT IS MANAGED BY

The family

The company

Name of the company		
Address of the company		
Contact details of the company representative for billing purposes.	Name	
	Position	
	Phone	
	Email	

#### 4) IMAGE RIGHTS

As part of school activities, images of your child can be taken. We therefore request your permission.

I **authorize** my child to appear in the school's visual content

▶ I allow the display of my child's visual content **within the school premises** (on school billboards, school television, class photographs).

Yes

No

▶ I allow the display of my child's visual content **outside the school premises** (the school's website, promotional videos, school correspondences by mail or Internet, local newspaper, news report). The captions will not contain any information that could identify the student or his or her family.

Yes

No

▶ I allow the display of my child's visual content on the **school's social networks** (Facebook, Instagram, LinkedIn). The captions will not contain any information that could identify the student or his or her family.

Yes

No

I **do not authorize** my child to appear in any photographs taken by the school.

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**Place:**

**Date:**

**Signature:**