

PAG. 1



ENSEÑAMO!	S EL PRESENTE, RESOLVEMOS EL FUTURO
REQUESTED YEAR/ GROUP	To be completed by the scho

N.I.E.		
	To be completed by the school	

REGISTRATION FORM NUMBER

L		
	To be completed by the school	

NEW REGISTRATION RENEWAL

To be completed by the scho	ol To be completed by the sch	ool To be completed by the school
PUPIL INI	ORMATION	
Surnames		Name
Date of birth		Place of birth Country
D.N.I./N.I.E./	/Passnort	Nationality/nationalities
	газэрогс	Nationality/ nationalities
An updated photograph is required for the application form.	Nur	nber of siblings Number of siblings currently in school
Student's firs	t language	Student's second language
Current address		
Address	Tow	yn Post Code
	El Pinar e-ma	il
Province	An e-mail add	ress is required and will be provided by the school if they do not have one
EL PINAR E-MAIL TRU:  An e-mail address is required and will be provide	d by the school if they do not have one	EL PINAR E-MAIL  TRA:  An e-mail address is required and will be provided by the school if they do not have one
Marital status of the parents:	a 27 and solidor in the flat of the flat of the	Type of Custody:
	OTUED / CAREDO!	
The pupil resides with their: FATHER / M	OTHER / CARERS (cross out wh	* Please attach the necessary documents if parents are separated or divorced
LEGAL TUTOR DETAILS NAME		LEGAL TUTOR DETAILS  NAME
SURNAME		SURNAME
D.N.I./N.I.E.		D.N.I./N.I.E.
AGE NATION	ALITY	AGE NATIONALITY
LEVEL OF STUDIES		LEVEL OF STUDIES
PROFESSION		PROFESSION
COMPANY		COMPANY
HOME TELEPHONE- MOBILE NUMBER	//	HOME TELEPHONE- // MOBILE NUMBER
WORK TELEPHONE NUMBER		WORK TELEPHONE NUMBER
EMERGENCY CONTACT		EMERGENCY CONTACT
PERSONAL E-MAIL		PERSONAL E-MAIL
ADDRESS		ADDRESS
TOWN	POST CODE	TOWN POST CODE
In	Alhaurín de la Torre,	20

**School Stamp** 

Signature of the Legal Tutor



REGISTRATION 2019-2020 **FORM NUMBER** 

To be completed by the school

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E Pinar ENSERAMOS EL PRESENTE. RESOLVEMOS EL FUTURO	BILLING INFORMATION AND OTHER SI	ERVICES

BILLING INFORMATION					
PAYMENT IN CASH*	BY CREDIT CAF	RD		BY DIRECT DEBIT	
* The payment of school fees can not be made in cash.					
SAVINGS PLANS IN SCHOOLING			Niconal	oer of children	
SINGLE PAYMENT	FAMILY PLAN			ntly in school	
AGREEMENT PLAN	Commoni				
	сотграну				
ACCOUNT HOLDER'S PERSONAL DATA					
Account holder's name:					
Account holder's N.I.F.:					
BANK NAME					
Bank account number					
IBAN Bank	Bra	nch	D.C.	Account	
The undersigned hereby authorized the school El Pin the school fees and other contracted services to the				eet, 29130 Alhaurín de la Torre	, Málaga to charge
ODTIONAL CEDIVICES			555 444	D AFTER COULON OLUM	
OPTIONAL SERVICES SCHOOL CANTEEN:			PKE- AN	D AFTER-SCHOOL CLUBS	
ANNUAL	135 €/month	PRF-SC	HOOL CITI	B WITHOUT BREAKFAST	
		]		B WITH BREAKFAST	
SINGLE MONTH					
SINGLE TICKET	. ,	_		LUB (Mon. To Fri.)	
PACKED LUNCH - FOOD FROM HOME (Only from secondary school)	30€/month	FRIDAY	AFTER-SCI	HOOL CLUB	
, ,					
SCHOOL TRANSPORT	ST	ATE STOP		MONT	HS
RETURN				JUNE	
ONE WAY TO SCHOOL				SEPTEMBER	
ONE WAY FROM SCHOOL				OCTOBER TO MA	AY
SINGLE TICKET					
		In Alha	urin de la	Torre, 2	0
SCHOOL STAMP		Signature of th	ne Legal Tuto	r	



2019-2020

PAG. 3

ACADEMIC DATA
OPTIONAL SUBJECTS
INFANTIL (from 3 to 5 years old)

REGISTRATION FORM NUMBER	
	be completed by the school

PREVIOUS SC Current school School Town	ol name	R DATA	
ONAL ECTS	PLEASE,	RELIGIÓN	
OPTIONAL	SELECT ONE	VALORES ÉTICOS	



## REGISTRATION 2019-2020 FORM NUMBER

To be completed by the school

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# ENSERAMOS EL PRESENTE, RESOLVEMOS EL PUTURO AUTHORISATIONS To be complete

PERMISSION FOR MINOR MEDICATIONS ((ibuprofen, paracetamol, non-pres	cription, etc)
I, Legal Tutor, give p	permission for my child
to take basic me	dicine if necessary in case of emergency.
	Signature of the Legal Tutor
INTERNET AUTHORIZATION	
I, Legal Tutor,	give permission for my child
on the school website, Twitter, Facebook or Google+	r in photos and videos that we publish
	Signature of the Legal Tutor
AUTHORIZATION FOR SCHOOL TRIPS	
I, Legal Tutor, give p	ermission for my child
to participate in	planned excursions.
	Signature of the Legal Tutor
PEOPLE AUTHORIZED TO PICK UP MY CHILD FROM SCHOOL	
NAME D.N.I/N.I.E	
NAME D.N.I/N.I.E	
NAME D.N.I./N.I.E	
NAME D.N.I./N.I.E	
NAME D.N.I./N.I.E	
NAME D.N.I. /N.I.E	
	Signature of the Legal tutor
Inde 20	



ADDITIONAL INFORMATION

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Does your child have any illness or allergy? YES NO				
Please give details				
Please, add any information which you feel would help us in providing for your child's needs (health, food, etc)				
Does your child have or has ever had any dissability (visual, YES NO hearing, motor skills problems)?				
Do you think your child has any special educational needs? YES NO				
Will your child require special resources to attend to our school? YES NO				
Has your child received any special education input in the past? (i.e. individual education program, extra help with reading and writing, speech and language therapy, occupational therapy, an assessment by an educational psycologist) Please, give details and/or copies of reports of it.				
DECLARATION AND SIGNATURE				
The family declares that accepts the general rules of the school El Pinar, and expresses its agreement to comply with the school policies.				
ILegal Tutor				
confirm that I have read and understood all terms and conditions of this enrolment and the attached documents included in the admission pack.  I also declare that the information on this form is true and correct and has been provided by me.				
In Alhaurín de la Torre, 20				
Signature				