Poulstrup Friskole ੪ Børnehus

- vi gør det bedre



Registration form – Poulstrup Børnehus (Please fill out in block letters)

The child's name		Social security number (CPR)		
Address		Kindergarten Nursery		
Custody		Start date		
Joint ☐ Mom ☐ Dad ☐	Foster child \square			
Native language (other than Danish)	Country of origin (other than Denma	rk) Language used at home (other than Danish)		
Mom's name	Social security number (CPR)	Address		
Secret phone number \square	Cell phone Work phone	Email address		
	- P			
Dad's name	Social security number (CPR)	Address		
Secret phone number \square	Cell phone Work phone	Email address		
-	- P			
Name of guardian or other contact person	Social security number (CPR)	Address		
Secret phone number \square	Cell phone Work phone	Email address		
Please inform of siblings, who are not enrolled at Poulstrup Friskole & Børnehus.				
Sibling's name	Social security number (CPR)	School Kindergarten Nursery Daycare		
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Known by PPR (Educational Psychology Consultants)		Permission to obtain information from PPR		
Yes □ No □		Yes □ No □		
Medical information:		Does the child follow the recommended vaccination		
Name		program?		
Address		Yes □ No □		
Tel.				
Other health related information		1		
Photo/video permission – Facebook	Photo/video permission – website		Permission to be transported in	
, ,	and PR		private vehicles	
Yes □ No □	Yes □ No □		Yes □ No □	
Aside from the parents, who are allow	ved to pick up the c	hild?:		
Additional information, which is impo	rtant for Poulstrup	Friskole & Børnehu	s to have knowledge of:	
Signature mom		Signature dad		

Further information about Poulstrup Friskole & Børnehus can be located at www.poulstrupfri.net/en
If the requested information is not available on our website, questions can be addressed to info@poulstrupfri.net or addressed on the phone at +45 71 99 71 03.