Mougins School Enrolment Form

Please print and return, signed, to the school office with the appropriate application fee.

Family Name of Pupil : …….

First and Middle Names : …….

Date of Birth : ……. Sex : ……...
(Day/Month/Year)

Age on 1st September 20 …… : ……... years …… months

Place of Birth : ……... Nationality : ……..…

Mother Tongue : ……..... Other Languages : ……..

Name/Address of previous school : …….

…….…

Name of Parent/Guardian* …….…

Parent's first names : …….…

Family details (married, divorced, etc.) …….

Home Address : …….…

…….…

Home Tel N° : …… Emergency Contact N° : ……..

Profession of mother : ……... Profession of father : ……

Full Business Name and Address : ……

……...

Business Tel 1 : …… Business Tel N° : ……..

Fax : ……. e-mail:…….

To which address should the invoice be sent ? …….

……

Please disclose any Special Needs your child has. (This can include physical disabilities, sensory impairment or learning difficulties). …….

…….…

…….…

I hereby confirm the above information is correct / Je soussigné(e) certifie que les renseignements ci-dessus sont exacts.

Signature of Parent / Guardian* : …….. Date : ……..

FOR SCHOOL USE ONLY

Form at entry : …… Date of Entry : ……