



Father's Details:

Name _____
Surname First Name Middle Name

Nationality _____

Passport/ID No. _____ Place of Issue (Country) _____

Type of Visa _____

Office Name _____

Position _____

Local Office Address

Tel: _____ Mobile No. : _____

Email Address: _____

Local Home Address

Tel: _____ Email Address: _____

Mother's Details:

Name _____
Surname First Name Middle Name

Nationality _____

Passport/ID No. _____ Place of Issue (Country) _____

Type of Visa _____

Office Name _____

Position _____

Local Office Address

Tel: _____ Mobile No. : _____

Email Address: _____

Local Home Address

Tel: _____ Email Address: _____



St. Andrews
International School

Address for correspondence:

Office address of Mother Father

Home address of Mother Father

Address for sending invoice:

Office address of Mother Father

Home address of Mother Father

Please advise, in brief, any medical conditions, food allergies or health concerns (Note you will be required to complete more detailed information on a separate medical form that will be provided by the school.)

Please advise if St. Andrews has your permission to use photos, that your child may appear in, for purposes such as newsletters, websites, etc. Yes No

INDEMNITY TO ST. ANDREWS INTERNATIONAL SCHOOL

I agree to my child, _____ being included in swimming lessons, educational outings and other educational activities arranged by the school while s/he is attending St. Andrews International School. In the event of any injury to my child or damage to the property of my child whilst participating in the above, or while on the school premises or being transported to or from the school, I will not hold the school or any member to the school staff responsible. In the event that my child travels to or from school on one of the buses organised by the School Transport Department, I agree that in the event of any injury to my child I will not hold the School Transport Department or any of its members liable. In signing this indemnity, I understand that in the event of an emergency every effort will be made to contact parents. If this is not possible my child will be taken to either his/her family doctor, or a suitable hospital for treatment. I also give permission for my child to be observed for educational purposes.

Students Insurance: our levels of insured liability for students while involved in any school activities are 50,000 THB (Loss of life, ADD, PD) & 10,000 THB (Medical).

Enrollment: We accept children into our school on the basis of our preliminary assessment, information from parents and previous school, medical and/or specialists report. If a child develops a condition or needs that cannot be met in our mainstream environment, then another, more suitable school may need to be found. This process is always done through consultation with parents and is based on recommendations from the school and associated educational specialists.

Date _____

Signature _____ (Parent/Guardian)



FOR OFFICE USE ONLY

Allocation to class is made ONLY by the Head of School

Placement: Accepted for: _____ Class Placement: _____ Starting Date: _____
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Approved for enrolment and admission:

HOS's Signature _____ Date _____

Documents and fee required for enrolment:	Received by	Date
1. Application Fee	1. _____	_____
2. Photocopy of Parents' Passports & Visas	2. _____	_____
3. Photocopy of Child's Passport & Visa	3. _____	_____
4. Photocopy of Child's Birth Certificate	4. _____	_____
5. Photocopy of Previous School Report	5. _____	_____
6. Child's Medical Report	6. _____	_____
7. 2 Photo	7. _____	_____
8. Enrolment Fee	8. _____	_____
9. All admissions documents in the St. Andrews admissions folder.	9. _____	_____

Application Fee: Invoice No. _____ Baht _____ Initial _____

Enrolment Fee: Invoice No. _____ Baht _____ Initial _____

Notes: