



Brainy Hive Kids Care

Crèche & Elementary-School

10, Prince Utuk Street, Off Esuene Street

Federal Housing Estate,

Uyo, Akwa Ibom State

07031920054 | support@brainyhivekidscare.com

www.brainyhivekidscare.com

ADMISSION APPLICATION FORM

Please fill and submit completed forms either to the address above or online at support@brainyhivekidscare.com

CHILD'S DETAILS

Surname	
First Name	
Other Names	
Pet Name	
Date of Birth	
Sex	

PARENTS DETAILS

	FATHER	MOTHER
Title		
Name		
Surname		
Home Address		
Telephone Number		
Occupation		
Employer		
Office Address		
Marital State (Single, Married, Divorced, Widowed)		

FAMILY INFORMATION

Number of Siblings	
Position in the Family	
Names of some siblings or relatives known to the child	

MEDICAL INFORMATION OF CHILD

Does this child have a special hospital?			
Doctors phone number if any.			
Has the child suffered or currently suffers any contagious disease?	Disease		
Please state any immunization records the child has (please fill as appropriate)			
Disease	Immunization Date	Disease	Immunization Date
Polio			
Does this child have any known allergies?			
Does the child react to any food?			
Does this child have any health issue we should know about? (epileptic, diabetic, sickle cell)			
Blood group of this child			
Genotype of this child			
Any physical or health conditions we should know about?			

What should we do in the case of a medical emergency? Please tick as appropriate

Respond with first aid and call the baby's doctor	
Respond with first aid and call the baby's parents	
Don't do anything, call the baby's doctor	
Don't do anything, call the baby's parents	
Respond with first aid and call any doctor	
Other action, please specify:	

ADMISSION INFORMATION

Who will be responsible for picking this child up from school?	Name	Relationship to Child
What class are you applying for (please tick appropriate)	Crèche	
	Preparatory	
	Kindergarten I	
	Kindergarten II	
	Nursery 1	
	Grades 1-5	
What time do you expect to pick this child from school daily? <i>Crèche's closing time is 4:30pm while other classes close 2pm</i>		

Brainy Hive Kids Care promises to keep all records confidential and shall not at any point disclose the information given in this form to a third party without the express permission of the parents /guardian of the child.

Please submit this form with the following:

1. Registration fee of N 3,000 (Three Thousand Naira Only)
2. 2 Passports or other Photographs of the Child

ADMINISTRATIVE USE ONLY

Form Submitted On (Date)	
Collected by	
Admission Status	

Authorized Stamp/Sign