

**BRK Kindergarten Prinzenpark**  
Träger: BRK Freising  
Prinz-Ludwig-Str. 40  
85354 Freising  
Leitung: Andrea di Meola



**Bayerisches Rotes Kreuz** 

Tel.:(08161)233670 Fax.:(08161)233672

**Registration Form**  
**Kindergarten Year September 20 /20**

**Please print legibly:**

**Child's Details:**

Surname, first name: .....

Date of Birth: .....

Gender:  male  female

Citizenship: .....

Knowledge of German:  yes  some  no

Address: .....

**Parents' Details:**

Mother

Father

Surname, first name: .....

.....

Address: .....

.....

Telephone: .....

.....

Mobile phone: .....

.....

Country of Origin: .....

.....

in employment

in employment

in employment  
and a single parent

**A single parent family is defined as a family where the child lives in a one parent household.**

Please enter the required **daily hours** :

Attendance	Monday	Tuesday	Wednesday	Thursday	Friday	Total hours per week
from - until (time)						
Total hours per day						

Lunch:     yes     no

Additional Information. ....  
 .....  
 .....  
 .....  
 .....

Places will be allocated in accordance with the number of places available as well as with the terms laid out in §4 of the BRK Kindergarten Freising Rules & Regulations.

**I ensure herewith that all information is complete and correct. I am aware that false information can lead to the loss of my kindergarten place.**

Freising, the

.....  
Date

.....  
Signature