

CHILD REGISTRATION FORM

Montessori Childcare Group Monteschool

Child Information:

Date and Place of Birth: Nationality:	Citizenship: de):	
Personal Identification Number (if applicable): Health Insurance Provider:		
Family	Information:	
Address (correspondence address):		
Permanent address:	Email:	
Address (correspondence address):		
Permanent address: Phone:	Email:	



SIBLINGS Last name and first name:	Date of birth:
Child placed under the care of:	Dated: ent during:
to the organization. I agree that the N	diately report any changes in my child's health Montessori Kindergarten Monteschool, Hulická ur child's data in cases where it is absolutely
Signature of the legal representative of	f the child: Place and Date:

Montessori preschool Monteschool – the childcare group, as the data controller, handles the provided data in accordance with GDPR principles.