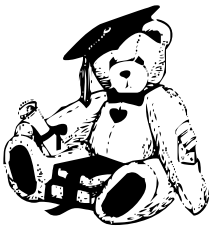
PARKSIDE SCHOOL



REGISTRATION FORM

REGISTRANT INFORMATION

CHILD

Last Name: First Name:

Date of birth: Nationality:

Native Language: Other languages spoken:

☐ Male ☐ Female

Please provide any information with regard to illnesses, allergies, medications, special needs/habits, special diet of which the school should be aware.

PARENT INFORMATION AND BILLING ADDRESS

MOTHER	**FATHER**
Last name:	Last name:
First name:	First name:
Date of Birth:	Date of Birth:
Nationality:	Nationality:
Street:	Street:
ZIP / Town:	ZIP / Town:
Occupation:	Occupation:
Employer:	Employer:
Telephone (home):	Telephone (home):
Telephone (work):	Telephone (work):
Mobile:	Mobile:
E-mail:	E-mail:

PEDIATRICIAN:

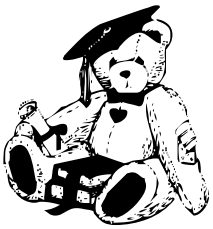
Doctor's name: Office telephone:

Address:

Parkside School Pre-school & Kindergarten Thalwil
Kirchbodenstr. 2a, 8800 Thalwil
Tel. 044 441 7053; thalwil@parksideschool.ch

Parkside School Oberrieden+Verwaltung
Hubstr. 6, 8942 Oberrieden
Tel. 044 720 4268; info@parksideschool.ch

PARKSIDE SCHOOL



EMERGENCY CONTACT

When neither parent can be reached by telephone and in the event of an illness, accident or medical emergency please contact:

Name: _____ Telephone: _____

Address: _____ _____

PLEASE CHECK IF IN AGREEMENT:

O I/We hereby confirm that we are covered by an accident, liability and health insurance.

O In the event of an illness or medical emergency I/we hereby authorize Parkside School to take my/ our child to a local pediatrician/doctor or hospital. All related costs must, in full, be covered by the parent(s)/guardian.

O Photos of my child may be published on the website of Parkside School (without naming the child, no portraits)

Place / Date: _____ Place / Date: _____

Mother/Guardian's Signature: _____ Father/Guardian's Signature: _____

Registration:

We check the availability of a space according to this registration form.

If we can take up your child we will send you a contract. Please countersign and send this contract back to us within 10 days.

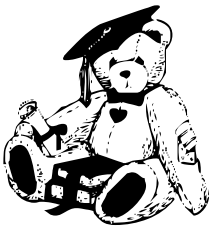
We are curious: From where did you here about the Parkside School?

O Ad (Newspaper)
O Advertisement (posters, sponsoring)
O Internet (Google and other search engines)
O Friends, Relatives
O other: _____

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PARKSIDE SCHOOL



PRE-SCHOOL AND KINDERGARTEN (BILINGUAL, THALWIL):

Date of entry: _____

☐ Pre-school Group Thalwil ☐ Kindergarten-Group

Desired placement:

	Monday	Tuesday	Wednesday	Thursday	Friday
Full day					

Other days possible?

_____

DAYCARE OBERRIEDEN (BILINGUAL):

Date of entry: _____

Desired group if available:

O Group "Tintenfische" (attic)

O Group "Seepferdli" (1. floor)

O Pre-school Group (ground floor)

O Group "Schildchrötli" (attic)

O Babygroup (1. floor)

O Montessori Kindergarten (ground floor)

Desired placement:

	Monday	Tuesday	Wednesday	Thursday	Friday
Full day					

Other days possible?

_____

Minimum attendance are 2 days in all groups except for the kindergarten, where the minimum is 3 days.

Version 2027

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