Hong Kong Christian Service Shek Kip Mei Nursery School

Application Form of Extended Hours Child Care Service

		File No.: Registration Date:		
Name of Child:(Ch	(1	(English)		
ate of Birth:Geno		ler:Phone No.:		
Residential Address	:			
Parents Information	· :			
	Father		Mother	
Name				
Occupation				
Working Hour				
Company Address				
Mobile Phone No.				
Information of Relat	tives in case parents	cannot be rea	ched:	
		Contact No.:		
Correspondence Ad			'	
Extension Service Pe	eriod :			
	Date of Service	Extension Period		
Reason(s) for Applying Service		Monday to Fr (Night) 6pm-7pm / 6	-	Saturday (Afternoon) 1pm-3pm

Remarks: