SRI KUALA LUMPUR

Pre-school, Primary & Secondary School

No. 1, Jalan SS15/7A, 47500 Subang Jaya, Selangor, Malaysia tel: (03) 56343491/3, fax: (03) 56343489, web: www.srikl.edu.my

REGISTRATION FORM

instructions

Please complete all sections of this form in black or blue ink.

Please use BLOCK CAPITAL LETTERS.

For items marked with an asterisk (*), please delete as necessary.

ONLY the legal father, mother or guardian of the registering student should fill in this form.

attach recent colour photo of student

admission		for office use only
Date of this registration		,
	aur ()	
Year of admission to Sri Kuala Lum		
Registration for (please tick box as required and	Pre-school Standard	
specify Standard/CIPP Year or	Secondary School Form/Year	
Form/O'Level Year)		
particulars of student		
Full name		
Date of birth	Sex MALE* FEMALE*	
Age at date of registration	years and months	
Birth Certificate No./IC No./Passpor	rt No.*	
Nationality	Siblings at SKL YES* NO*	
Race		
Religion		
Current home address		
Home telephone no.		
places notify the school imp	nediately of any change in address or contact number	
please floury the school infin	neulatery of any change in address of contact number	

particulars of parents or gu	uardian
	er OR Mother OR Guardian. For the purposes of ardian shall be deemed to have legal custody of the ing.
Name of Registering Parent OR Legal Guardian	
IC No./Passport No.*	
Relationship to student	FATHER* MOTHER* LEGAL GUARDIAN*
Occupation	
Current home address	
Home tel. no.	h/p no.
Office tel no.	
Email add.	
Please enter the name of the parent (legandors) Do not fill in this section if registering und	al Father or Mother only) not previously named above. der Legal Guardian.
Name of Other Parent	
IC No./Passport No.*	
Relationship to student	FATHER* MOTHER*
Occupation	
Current home address	
(if different from above	
address)	
Home tel. no.	h/p no.
Office tel no.	
Please supply the name of another person parents or guardian are not available.	on to contact in the event of an emergency where
Name	
Tel. No.	h/p no.
ala er e	
please notity the school imme	ediately of any change in address or contact number

student's school history Please enter the name of previous schools the student has attended, if any, and details of enrolement as indicated. Name of school Year enrolled Std/Form to to to Has the registering student ever been expelled from school? YES* NO* If YES please provide reason for expulsion? student's health Does the registering student suffer from any illness requiring special medication or attention? YES* NO* If YES please give details of condition and required care/medication. **DISCLAIMER** In the event of accident or injury to the registering student, the registering parent or guardian hereby authorizes the school to administer basic first aid and in the case of serious injury or illness to immediately refer the student to a registered medical practisioner and the school shall not be held liable for any negligent acts or omissions on the part of any third parties or complications in respect of the treatment of the student.

requi	red supporting documentation				
Please provide the following documents and photographs attached together with this registration form: (check-list)		(check-list)			
1 (One copy of the registering student's Birth Certificate/Identity Card/Passport*.				
2 (One copy of the student's Leaving Certificate if entering school after Standard One.				
3 (Copies of the student's exam results for all school examinations taken.				
4 7	Two recent passport size colour photographs of the registering student.				
5 (Cash or Cheque Payment of REGISTRATION FEE.				
important information					
Please submitti					
ŗ	When making any payment, all cheques, postal orders or bank drafts should be made payable to OTHMAN MERICAN EDUCATIONAL DEVELOPMENT BHD and crossed Account Payee.				
(b) F	b) Payment may also be made by cash. Please remember to collect a receipt.				
(c) T	(c) The registration fee is non-refundable and non-transferable.				
(d) A	d) All fees and deposits are subject to change by the school without prior notice.				
	Registered students are required to pay fees and deposits in full before the start of each school term and all late fees or deposits will incur a 5% service charge.				
	f) Students whose fees or deposits are not fully paid up one week from the start of the school term will be suspended from attending class until full settlement.				
8	(g) Students whose fees or deposits are not fully paid up one month from the start of the school term will have their registration terminated and will forfeit all previously paid sums to the school without refund.				
(h) Registered students are required to report for school not later than 14 days after the start of the school term. Students who do not report for school within this period will be deemed to have terminated their studies at the school and will be removed from the class register without refund of any fees or deposits. Students wishing to report for school after 14 days from the start of the school term must apply in writing to the Principal not later than 14 days after the school term has begun.					
a	(i) Students who require transport to and from school are advised to make appropriate arrangements with the school's registered bus operator. Please ask at the reception desk or contact the administration office for more information.				
signa	ture of parent or guardian				
As the legal parent/guardian* of the registering student, I have read and understood the contents of this registration form and agree to be bound by the conditions contained herein.					
I further warrant that the information I have given here is true and correct to the best of my knowledge.					
signature of parent or guardian date					