



RE-REGISTRATION FORM

We want to guarantee your child's spot for the next year so please be sure to re-register before the due date.

Student's Personal Information

Student's Name:

Date of Birth:

Gender: Male Female Programme:

Contact Number :

Alternative Number :

Permanent Address :

Present Address :

(if different from permanent address)

Parent / Guardian Information

Full Name:

Contact Number :

Alternative Number :

Permanent Address :

Present Address :

(if different from permanent address)

Guardian Signature :

Date :