

Dear parent

APPLICATION PACK

Thank you for considering KG Kids as your chosen provider of education for your child where we provide one of the highest standards in bilingual Arabic and English education.

As well as excellent care and facilities, parents can be assured of individual care for their child. Highly qualified staff teach the British National Curriculum and a complimentary Arabic programme using the latest technology in teaching methods such as interactive whiteboards, tablets and multimedia computers. Our programme extends to a range of fun, educational afterschool activities including specialist music and martial art classes. Well-equipped bright classrooms, shaded play areas and safety flooring ensure the best education in a wonderful safe and secure environment.

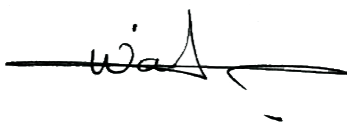
British owned and managed with over 25 years of successful experience, KG Kids is a centre of excellence, a complete world for your children. Whether your child is a native speaker or expatriate looking for a marvellous opportunity to learn and be involved in Bahrain's culture, we are indeed a caring and professional beginning to their bilingual future.

In this application pack, you will find all the information required to register your child with KG Kids. The following documents should be completed in full and returned to the School Office:

1. Application check list
2. Application form
3. Student health form
4. Emergency medical form
5. School fees policy
6. School bus information and application form

A copy of our Parent Handbook is also enclosed which provides you with information about the school curriculum, uniform, school opening times etc.

Please contact me should you have any questions, require further information or would like to arrange a visit.



Wahiba Abdurrahman
Deputy Director KG Kids Pre-School & Palms School

Application check list

Please confirm you have provided the following for your child:

- Completed and signed application form
- Initial registration fee of 120 BD (non-refundable)
- Completed and signed student health form
- Completed and signed emergency medical form
- Signed copy of acceptance of our school fees policy
- School bus application form (if applicable)
- 4 passport-sized photographs
- A copy of your child's CPR
- A copy of the father's CPR
- A copy of the mother's CPR
- If applicable, a copy of the legal guardian's CPR
- A copy of your child's passport
- A copy of your child's health certificate
- A copy of your child's birth certificate

Please note that failure to provide the above will prevent us from processing your application and may result in your child not being offered a place within the school.

<i>For office use:</i>	<i>Registration No.</i>		<i>Date of application</i>
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Application Form

Application for the academic year:	2017/18	<input type="radio"/>	2018/19	<input type="radio"/>	2019/20	<input type="radio"/>
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For grade	Pre-Nursery	<input type="radio"/>	Nursery	<input type="radio"/>	KG1	<input type="radio"/>	KG2	<input type="radio"/>
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Student name (as shown on passport)					
Father's name					
Family name					
Mother's name					
Student's nationality					
Place of birth					
Gender	Male	<input type="radio"/>	Female	<input type="radio"/>	
Religion					
CPR number					
Date of birth	DD		MM		YYYY

Father's mobile number					
Fathers email					

Mother's mobile number					
Mother's email					

Child's passport number					
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Child's first language	
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Other languages spoken	
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Number of siblings	Brothers		Sisters	
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Child's order in family	
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Residential status	Living with parents	Living with Father	Living with Mother	Other
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Does your child have any siblings in the School?	Yes	<input type="radio"/>	No	<input type="radio"/>
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If yes, please tell us their names and grades

Home address	House number	
	Building number	
	Road number	
	Block number	
	Area	
Home telephone number		

Please give us the name of the person to whom correspondence should be sent

Name:

Email:

Please tell us their correspondence address (if different to home address)

Father's CPR number

Father's occupation

Fathers academic qualifications

Father's business address

Father's business contact number

Mother's CPR number

Mother's occupation

Mother's academic qualifications

Mother's business address

Mother's business contact number

First emergency contact in the absence of the above

Name

Relationship to student

Address

Mobile number

Alternative contact number

Second emergency contact in the absence of the above	
Name	
Relationship to student	
Address	
Mobile number	
Alternative contact number	

The school regularly produces promotional material featuring the school and its students. This may appear on line on Instagram or Facebook, or in printed material. Please confirm if you are happy for your child to appear in such publications.

Yes	<input type="radio"/>	No	<input type="radio"/>
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The school also produces an annual yearbook and calendar. Please confirm if you are happy for your child, or their work, to appear in either of these.

Yes	<input type="radio"/>	No	<input type="radio"/>
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Where did you hear about KG Kids?	
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Parent's signature	
	Date

Student Health Form

Attach
photograph
here

Student name (as shown on passport)

Date of birth	DD		MM		YYYY	
CPR number						
Father's name						
Father's mobile number						
Mother's name						
Mother's mobile number						

Home address	House number	
	Building number	
	Road number	
	Block number	
	Area	
Home telephone number		

Emergency contact in the absence of the above	
Name	
Relationship to student	
Address	
Mobile number	
Alternative contact number	

Health contacts	
Regular source of medical care	
Contact number	
Regular source of dental care	
Contact number	

To be completed by Physician

Health Centre / Private Clinic				
Address				
Students age at examination	Years		Months	
Health record number				
Family file number				

After reviewing the vaccination card and the health record of the above-mentioned student, whose photo is attached, and examining him/her by the physician concerned, the following is/are advised:

Is the student is fit to join the general school?	Yes	<input type="radio"/>	No	<input type="radio"/>
Does the student needs an assessment of his/her learning capabilities	Yes	<input type="radio"/>	No	<input type="radio"/>
If yes, please specify reasons				

The student needs completion of immunization, due on:	/ / 20			
Does the student need special care at school?	Yes	<input type="radio"/>	No	<input type="radio"/>
If yes, provide details of the care required:				

Medical history

Accidents	Yes	<input type="radio"/>	No	<input type="radio"/>	Allergy	Yes	<input type="radio"/>	No	<input type="radio"/>
Chicken pox	Yes	<input type="radio"/>	No	<input type="radio"/>	Congenital anomaly	Yes	<input type="radio"/>	No	<input type="radio"/>
Convulsions	Yes	<input type="radio"/>	No	<input type="radio"/>	Diabetes	Yes	<input type="radio"/>	No	<input type="radio"/>
Ear infections	Yes	<input type="radio"/>	No	<input type="radio"/>	Encephalitis	Yes	<input type="radio"/>	No	<input type="radio"/>
German measles	Yes	<input type="radio"/>	No	<input type="radio"/>	Heart disease	Yes	<input type="radio"/>	No	<input type="radio"/>
Hernia	Yes	<input type="radio"/>	No	<input type="radio"/>	Kidney disease	Yes	<input type="radio"/>	No	<input type="radio"/>
Measles	Yes	<input type="radio"/>	No	<input type="radio"/>	Meningitis	Yes	<input type="radio"/>	No	<input type="radio"/>
Mumps	Yes	<input type="radio"/>	No	<input type="radio"/>	Operations	Yes	<input type="radio"/>	No	<input type="radio"/>
Poliomyelitis	Yes	<input type="radio"/>	No	<input type="radio"/>	Rheumatic fever	Yes	<input type="radio"/>	No	<input type="radio"/>
Scarlet fever	Yes	<input type="radio"/>	No	<input type="radio"/>	Strep throat infection	Yes	<input type="radio"/>	No	<input type="radio"/>
Tonsillitis	Yes	<input type="radio"/>	No	<input type="radio"/>	Tuberculosis	Yes	<input type="radio"/>	No	<input type="radio"/>
Whooping cough	Yes	<input type="radio"/>	No	<input type="radio"/>	G6PD deficiency	Yes	<input type="radio"/>	No	<input type="radio"/>
Sickle Cell anaemia	Yes	<input type="radio"/>	No	<input type="radio"/>	Oher blood disease	Yes	<input type="radio"/>	No	<input type="radio"/>
Other (please state)									

If 'yes' to any of the above, please provide information which the school needs to be aware of:

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Any other pertinent family medical history which the school needs to be aware of:

(O) Normal:				(X) Abnormal:			
Age:		BP:		Pulse:		Height:	
Physical development:				Nutritional status:			
Skin:							
Eyes	Sclera:			Pupils:	Glasses:		
Light & distance		Right:			Left:		
Ears	Canals R:			Canals L:			
Drums	Right:			Left:			
Nose	Septum:			Turbinate:			
Mouth	Lips:			Tongue:			Pharynx:
Teeth	Gingivitis:						
Neck	Mobility:			Lymph nodes:			Thyroid:
Throat	Shape:			Symmetry:			
Lungs							
Heart	Rate:			Rhythm:			Murmur:
Abdomen	Liver:			Spleen:			Hernias:
Spine:							
Lower extremities		Range of motion:			Development:		
Upper extremities		Range of motion:			Development:		
Cranial Nerva	I:XII:			Gait:			Coordination:

Physician's name		
Physician's signature		
Physician's stamp	Date	

Recommended immunization schedule for the expanded program of immunization, Bahrain

Please complete dates for the immunisations listed below and provide a copy of your child's vaccination record.

AGE	VACCINE	DOSE	DATE
At birth	BGC for new-borns born to parents originally from endemic countries	Single Dose	
	Hepatitis B for new-borns of HBsAg positive mothers or of unknown HBsAg status	Birth Dose	
2 months	DaPT, Hepatitis B, Inactivated Polio + Haemophilus Influenza Type B (Hexavalent)	1 st Dose	
	Conjugated Pneumococcal	1 st Dose	
	Rota Vaccine (oral)	1 st Dose	
4 months	DPT, Hepatitis B + Hib (Pentavalent)	2 nd Dose	
	OPV	2 nd Dose	
	Conjugated Pneumococcal	2 nd Dose	
	Rota Vaccine (oral)	2 nd Dose	
6 months	DPT, Hepatitis B + Hib (Pentavalent)	3 rd Dose	
	OPV	3 rd Dose	
	Conjugated Pneumococcal	3 rd Dose	
12 months	MMR	1 st Dose	
	Conjugated Pneumococcal	Booster	
18 months	OPV	1 st Booster	
	DPT, Hepatitis B + Hib (Pentavalent)	Booster	
	Hepatitis A	1 st Dose	
2 years	Meningococcal (ACYW)	Single Dose	
	Hepatitis A	2 nd Dose	
5-6 years	DTaP	2 nd Booster	
	OPV	2 nd Booster	
	MMR	2 nd Dose	
12 years	Hepatitis A (HA) as catch up for HA unvaccinated	1 st Dose	
13 years	Tdap	Booster	
	Hepatitis A (HA) as catch up for HA unvaccinated	2 nd Dose	

Emergency medical form

Student name		Grade	
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- In the event of a medical emergency, the School Nurse/First Aider will attend to the patient. If necessary, the patient will be taken to the nearest medical centre or hospital (BDF).
- The School Nurse/First Aider will accompany the patient.
- If deemed necessary by the Nurse/First Aider, a second adult will accompany the patient.
- If the patient is a child, then the parents will be contacted. If they are unavailable, then the school will call their nominated emergency contact.
- At the medical facility, school personnel will act in loco parentis until such time as the child's parent/guardian or nominated emergency contact person is in direct contact with the appropriate medical staff.

I have read, understood and accept the Medical Emergency Policy of the school.

Signature		Date	
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In an emergency please contact:

Name	Contact number	Relationship to student
Father		
Mother		
Other		
Other		

Please note:

1. Please remember to inform the school office if your child will absent from school because they are unwell or have a routine doctor's or dental appointment.
2. Please inform the school office as soon as possible if your child has been given any medication before coming to school.

3. If your child is taking a prescribed tablets or medicine and has to take it during school hours, please bring it to the school office first thing in the morning. It can be collected from there at the end of the school day. Please write clearly your child's name, class, time and dosage of medication. No medication is to be kept in school bags/cubby holes.

4. Please notify the school office immediately should your child contract any communicable diseases (e.g. chicken pox or head lice) or should there be any change in their overall health. This helps us to ensure that the health of your child and the school as a community is optimised.

5. It is extremely important to keep the school updated if there is any change in your contact details. Also, please inform the school office if both parents are leaving the country whilst your child is in school, ensuring that the school has the current contact details of a nominated emergency contact.



Building 925, Road 2623,
 West Riffa, Block 926
 P.O.Box 1116, Manama
 Kingdom of Bahrain
 tel +973 17663556
 fax +973 17664410
 info@kgkids.com
www.kgkids.com

School bus information & application form

KG Kids offers a limited school bus service within Riffa and close surrounding areas. Whilst parents are encouraged to make their own arrangements for their child attend school, should you wish to enquire about your child using the school bus, please complete the form below and we will contact you if a place is available. If the bus is full, we will place your name on a waiting list and contact you should a place become available.

Please note that we reserve the right to refuse the bus service if students live too far away from school. We may also amend the bus schedule in order to use the most efficient route and may vary this from time to time as students leave / join the bus service. Parents should also be aware that on days where the school finishes early, it may not always be possible for the bus to provide normal service.

I am interested in using the school bus service Yes No

Student's name		Grade	
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Home address	House number	
	Building number	
	Road number	
	Block number	
	Area	

I require the bus service (please tick as applicable):

	Sunday	Monday	Tuesday	Wednesday	Thursday
AM – home to school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
PM – school to home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

I understand the information above.

Parent's name: _____ Date: _____

Parent's signature _____

PARENT COPY – PLEASE RETAIN FOR YOUR RECORDS

School Fee Policy

We send out 3 invoices each year, as follows:

	Date issued	Final Date payable
Term 1	May 2017	31 August 2017
Term 2	November 2017	2 January 2018
Re-registration for 18/19	February 2018	28 February 2018

The table below illustrates fees payable, correct as of March 2017.

		Pre-Nursery	Nursery	KG1	KG2
Application fee (new students only)		120 BD	120 BD	120 BD	120 BD
Term 1	Fees	858 BD	858 BD	858 BD	858 BD
	Books	60 BD	60 BD	60 BD	60 BD
Term 2	Fees	858 BD	858 BD	858 BD	858 BD
	Books	60 BD	60 BD	60 BD	60 BD
Re-registration for 18/19		120 BD	120 BD	120 BD	
Registration into Grade 1 Palms School					115 BD

An annual re-registration fee is payable each year in order to reserve a place for your child. **Please note that if this is not paid by the due date, we will not reserve a place for your child for the following year.**

For students in KG2, we will invoice you in February 2018 in order for you to reserve a place in Grade 1 at Palms School. **Please note that if this is not paid by the due date, we will not reserve a place for your child at Palms School.**

School Days pack

The School Days pack includes the following.

- Class and individual school photographs
- Personalised calendar
- School Yearbook
- Music and movement (Pre-Nursery & Nursery) or Taekwondo (KG1 & KG2)
- Costume for annual school show
- Keepsake DVD from the annual school show
- Graduation Robe and photograph (KG2 only)



For the convenience of parents, the School Days Pack is charged in 2 instalments, as shown below.

	Pre-Nursery		Nursery		KG1		KG2	
	Term 1	Term 2	Term 1	Term 2	Term 1	Term 2	Term 1	Term 2
School Days pack	54.5 BD	54.5 BD	54.5 BD	54.5 BD	54.5 BD	54.5 BD	67 BD	67BD

Parents are asked to note the following:

- Tuition fees must be paid **in full** regardless of sickness or absence.
- Refunds will not be given under any circumstances
- Part payment or instalments are not accepted. If you are having any difficulties paying your invoice, please contact the School Accounts Office in the first instance.
- Fees are subject to regular increase, subject to approval from the Ministry of Education. In such an event, parents would be notified in advance, in writing.
- Reregistration will only be accepted if term fees have been paid.
- Some parents prefer to pay the whole year's fees in one payment. If you wish to do this, please contact the School Accounts Department who can arrange this for you.
- Parents wishing to withdraw their child from school must provide a full school term's notice in writing to the Principal. Failure to provide this advance notice will incur a term's school fee.
- Parents who will be on vacation when school fees are due must arrange for fees to be paid before departure.
- If you have concerns about your bill, please contact the school accounts department on 17663556 or by email to accounts@kgkids.com

Non –payment - The school reserves the right to restrict access for your child into school in the event that invoices are not paid by the due date. In the event that payment is not received, we will make every attempt to contact parents to discuss this, however parents must be aware that the school will enforce its right to restrict access or offer your child's place to a child on our waiting list, should invoices not be paid in full.

Methods of payment - School fees may be paid by any of the following methods, noting that payment via bank deposit or bank transfer is encouraged. Payment in person by cash or cheque should only be used if you are unable to pay by either bank deposit or bank transfer.

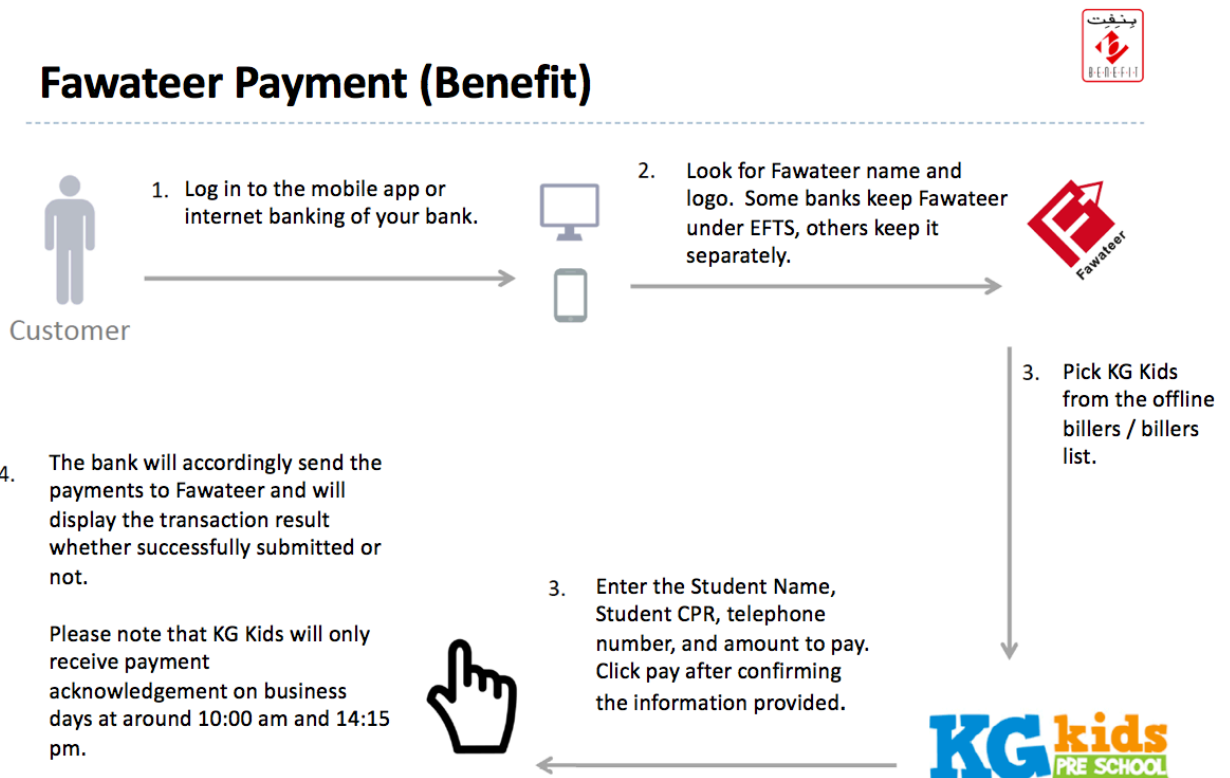
1. Bank transfer - You can transfer your payment from your bank account to ours using the details below. If you are using this method of payment, please include the Registration/Invoice Number shown on the invoice if you are asked to enter a reference number.

Parents are requested to kindly email accounts@kgkids.com to advise that a payment has been made so that an official receipt can be provided.

Bank: Khaleeji Commercial Bank Account Name: KG KIDS PRE SCHOOL
Account Number: 01 000 554 770 01 IBAN: BH33KHCB00100055477001
Swift Code: KHCBHBMXXX

2. Bank deposit - Payment can be made at any branch of Khaleeji Commercial Bank. Please complete the bank remittance form from our invoice and present it to the bank along with your payment. Please provide a copy of the deposit slip to the school accounts office who will provide you with an official receipt.
3. Cash or cheque - If you are unable to pay via one of the above methods, you may pay in cash or cheque at the school's accounts office. Cheques are payable to KG KIDS PRE SCHOOL.

4. You can now pay by Fawateer Payment (Benefit) from your mobile app or internet banking of your bank. The flowchart below tells you how to do this.





Building 925, Road 2623,
West Riffa, Block 926
P.O.Box 1116, Manama
Kingdom of Bahrain
tel +973 17663556
fax +973 17664410
info@kgkids.com
www.kgkids.com

SCHOOL COPY
PLEASE SIGN AND RETURN TO THE SCHOOL ACCOUNTS OFFICE

I have read and understood the School Fee Policy and agree to abide by the rules set out within this.

Student's name:		Grade	
Parent's name:			
Parent's signature			
Date	/ / 2017		

School Fee Policy

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Methods of payment

School fees may be paid by any of the following methods, noting that payment via bank deposit or bank transfer is encouraged. Payment in person by cash or cheque should only be used if you are unable to pay by either bank deposit or bank transfer.

- Bank transfer - You can transfer your payment from your bank account to ours using the details below. If you are using this method of payment, please include the Registration/Invoice Number shown on the invoice if you are asked to enter a reference number. Parents are requested to kindly email accounts@kgkids.com to advise that a payment has been made so that an official receipt can be provided.

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- Cash or cheque - If you are unable to pay via one of the above methods, you may pay in cash or cheque at the school's accounts office. Cheques are payable to KG KIDS PRE SCHOOL.
- You can now pay by Fawateer Payment (Benefit) from your mobile app or internet banking of your bank.

These documents are available in Arabic. Please ask the School Office for a copy.
هذه الملفات متوفرة باللغة العربية. يرجى التقديم لطلب نسخة من إدارة المدرسة.