



**Registration Form for
Katholische Kindergarten Christkönig
Josef-Fruth-Platz 7, 91522 Ansbach
Telephone 0981/86211**

Please return with this registration form filled in order for your child to be placed on our waiting list

Child's Name, First Name _____

Address (street and city) _____

Telephone Number _____

Birth Information (city, country, and birthdate) _____

Citizenship _____ Religion _____

Legal Guardianship: Both Parents Mother Father

Father's Name, First Name _____

Birth Information (city, country, and birthdate) _____

Marital Status: Single Married (marriage date) _____ Widowed

Occupation _____ Employer _____

Telephone Number _____ Cellphone Number _____

Citizenship _____ Religion _____

Mother's Name, First Name _____

Birth Information (city, country, and birthdate) _____

Marital Status: Single Married (marriage date) _____ Widowed

Occupation _____ Employer _____

Telephone Number _____ Cellphone Number _____

Citizenship _____ Religion _____

Siblings enrolled in the facility Yes _____ No

Single Parent Yes No

Employment Status Both Unemployed Other_____

(Confirmation of Employment by Employer)

Member of the Kindergarten's Association Yes No

Applied with another kindergarten? If yes, where?

Desired placement time of child within the facility_____

(month, year)

Desired Booking Times

Opening Times Monday through Thursday 7:00 am to 4:30 pm

Friday 7:00 am to 3:00 pm

Core educational hours (minimal booking times) from 8:30 am to 12:30 pm

Monday _____ to _____

Tuesday _____ to _____

Wednesday _____ to _____

Thursday _____ to _____

Friday _____ to _____

Drop-off times from 7:00 am to 8:30 am Pick-up times start at 12:30 am

Lunch is around 12:00 pm

My child will participate in the warm lunch on the following days *(3,00€ per meal)*

Monday Tuesday Wednesday Thursday Friday

Standard Without Pork Vegetarian

Place, date

Signature of Legal Guardian