



Preregistration

Private Bilinguale Ganztagschule, Langenbeckstr.5, 65189 Wiesbaden

School year 20 ____ /20 ____

Pre-school ____ 1st grade ____ 2nd grade ____ 3rd grade ____ 4th grade ____

Child

Name _____

First name _____

Street _____

*ZIP code, city, country _____

Month & year of birth _____

Parents / legal guardian

Name, first name mother _____

(Address only if different):

Street _____

*ZIP code, city, country _____

Name, first name father _____

(Address only if different):

Street _____

*ZIP code, city, country _____

Telephone for contact* _____

Email for contact * _____



All information, marked with * are not necessarily needed for the reservation process, it makes is easier to contact you and make an appointment for getting to know each other.

I / we have read the data protection notice for the reservation or admission to school and agree with the information processing.

Place, Date _____

Signature mother _____

Signature father _____