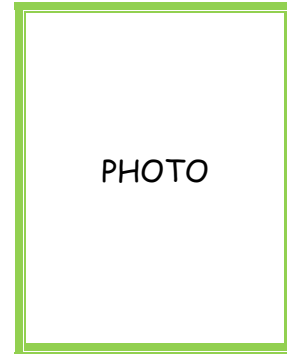


Crèche BioBébé Sarl

Foyer de Jour Registration Form



Child's Surname:

Childs' First Name:

Date Of Birth/Due Date :

Enrolment (starting) Date:

School/Maison Attending:

PARENTS

| Information | Mother | Father |
|-------------------|--------|--------|
| Surname: | | |
| Firstname: | | |
| Address: | | |
| Postal Code/City: | | |
| Tel: | | |
| Mobile: | | |
| Fax: | | |
| e-mail: | | |
| Profession: | | |
| Employer: | | |

Days Required:

| | Monday | Tuesday | Wednesday | Thursday | Friday |
|--------------------------|--------|---------|-----------|----------|--------|
| Times | | | | | |
| Pick-Up Service (Yes/No) | | | | | |

.....
Date, Place

.....
Date, Place

.....
Parents Signature

.....
Crèche BioBébé Sarl