Mindenkid Corvin English-Hungarian Kindergarten

SUMMER CAMP

1083 Budapest, Bókay János street 36-42.

Registration form

Personal data of the child		
Family name:	First na	ame:
Place of birth:	, time of birth	th: year month day
Please mark which week are	vou interested in:	
June 19 - 23.	Once upon a time	
July 26 - 30	The land of dinosaurs	
July 3 - 7.	Pirate treasure hunting	
July 10 - 14.	Junior Olympics	
July 17 - 21.	MasterChef junior	
July 24 - 28.	Welcome to the jungle	
July 31 - August 4.	Life under the water	
August 7 - 11.	Big bang theory for kids	
Information on medical care		
Health insurance number / TAJ number:		
If the child has an accident, the parent will be notified after first aid. Please indicate if there is any important information we need to know about your child's medical condition in the "Other" section.		
Contact information		
Home address:		
e-mail address:		
Father's name:		
Telephone:		
Mother's name:		
Telephone:		

Other comment:
Fee
Weekly fee (5 days): 50 000 HUF
The registration for the camp is final when the fee is paid in cash on the first day of the camp or transferred to the following account number before the start of camp:
Millennium Ovi Fenntartó Nonprofit Kft. Raiffeisen Bank 12001008-01551577-00300002
Please in the comment section note: "the name of your child" + summer camp
The camp fee will not be refunded in case you cancel.
By filling out the registration and application form, I am asking for my child to be admitted to the MindenKid Corvin Kindergarten summer camp. By signing, I certify that I know the conditions of participation, I accept them.
Date: Signature: