



Pinewood The American International School of Thessaloniki, Greece Registration Form



School Year _____ Grade _____

Student's Name _____ Male _____ Female _____
Last First Middle

Date of Birth _____ Country of Birth _____

Citizenship _____ Passport Number _____

Residence Permit Number _____

Address in Thessaloniki _____

Telephone in Thessaloniki _____ E-mail _____

In case of emergency contact _____ Phone _____

Native Tongue _____ Has studied English _____ Years _____

Previous School Attended and Address _____

Father's Name _____ Citizenship _____
Last First Middle

Home Address (if different) _____

Home Telephone (if different) _____ Work Phone _____

Employed by _____ Work Fax _____ E-mail _____

Address _____

Mother's Name _____ Citizenship _____
Last First Middle

Home Address (if different) _____

Home Telephone (if different) _____ Work Phone _____

Employed by _____ Work Fax _____ E-mail _____

Address _____

Please send any correspondence to: Home _____ Work _____

Does your child have any special medical condition or needs? If so, please specify _____

May we publish your local telephone number in the school directory? Yes _____ No _____

Will busing transportation be required? Yes _____ No _____

How did you learn about Pinewood? _____

Address where correspondance can be send when you leave Pinewood _____

Upon signing this application, I agree to abide by the schools policies and regulations as stated in the Pinewood Handbook for Students and Parents which I have received and reviewed.

Signature of Parent _____

Date _____

FOR OFFICE USE ONLY
<input type="checkbox"/> Passport
<input type="checkbox"/> Residence Permit
<input type="checkbox"/> School Records
<input type="checkbox"/> Health Form Completed
<input type="checkbox"/> Transportation Required
<input type="checkbox"/> Tuition _____ Full _____ Installments
<input type="checkbox"/> Yearbook
<input type="checkbox"/> Dormitory Form Completed