



WE GO GREEN DAYCARE CENTER

Matosa Street, Wazalendo Road, House No 65-Goba Ward, P.O. Box 31147

Ubungo-Dar Es Salaam-Tanzania: Tel: 0784 304781/0715304781

Email: wegogreendaycare@gmail.com

CHILD/PUPILS ENROLEMENT FORM 2023

Child's Picture

1. Pupils Personal Details

Child Name:(First)Middle..... Surname.....

Sex: Male Female Birthday: Date.....MonthYear.....

Primary Language..... Secondary Language.....

Religion..... Tribe (Optional).....

Identification Mark (if any)

Home Telephone.....

2. Parents/Guardian Information

Fathers name:

Occupation.....

Physical Address: (Rd/Street name).....House Number.....

Cell Phone: (1).....(2).....

Email:

Mothers name:

Occupation.....

Physical Address: (Rd/Street name) House Number.....

Cell Phone: (1) (2)

Email:

Guardian Name (If not a Parent)

Relationship with a Child:.....

Occupation.....



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Physical Address:(Rd/Street name) House Number.....

Cell Phone: (1) (2)

Email:.....

3. Pupil/Child Pickup Authorized Persons

No	Name	Phone	Relationship with a Child
1			
3			
3			

4. Commitment statement to administer First Aid

I hereby authorise WeGoGreen Day-care Center to administer First Aid to my Child when appropriate. I understand that every effort will be made to contact me in the event of an emergency requiring medical attention for my child. However, if I cannot be reached, I hereby authorise We Go Green Day-Care Center to take him/her to the Hospital (or any nearest medical facility) to secure necessary medical treatment for my child

Parent/Guardian name:signature.....Date.....

5. Other Child Information

Allergies

- Does your Child have any allergy? Yes No

If yes, please explain

- Is he /she life threatening

- Does your child have any chronic health Concern? Yes No

If yes, please explain

- Is your child undergoing any regular medications? Yes No

If yes, please explain

- Any other special limitations or concern

Eating Habit

Child eating Characteristics: Mashed foods Solid Foods liquid foods

The child eats with spoon fork



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I certify that the above information is true to the best of my knowledge.

Parent/Guardian name:

Signature:.....

Date:

For Official Use only.

Received and signed by:on behalf of the School Management

Signature: Date:

