

School visit request form

Father's name: Occupation:

Mother's name:..... Occupation:

Child's name:..... Date of Birth:

Nationality:..... Sex: M/F Languages spoken.....

Do the parents speak English? Language used at home:

Current school (if any) Yr group attended

Brief history of child's education until present:

Contact details.

Home telephone number:

Mother's Cell number: E-mail address:

Father's cell number: E-mail address:

Please give a short presentation of your family and your reason for interest in Chatterbox.

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How did you hear about Chatterbox?

Any additional information (medical, special needs, etc):

.....

.....

Which school are you interested in visiting? Tick the appropriate box			
<p>Quartu S.E. – v. Cilea</p> <p><input type="checkbox"/> Spazio Bimbo</p>	<p>Cagliari – v. Bacaredda</p> <p><input type="checkbox"/> Sezione Primavera Sperimentale (18 to 36 months)</p> <p><input type="checkbox"/> Playschool (scuola dell'infanzia)</p>	<p>Cagliari – v.le La Plaia</p> <p><input type="checkbox"/> Sezione Primavera Sperimentale (18 to 36 months)</p> <p><input type="checkbox"/> Playschool (scuola dell'infanzia)</p>	<p>Cagliari – v. Tempio</p> <p><input type="checkbox"/> Playschool (scuola dell'infanzia) (5+years)</p> <p><input type="checkbox"/> Primary School (6 to 10 years)</p>

Office use only. Appt: with:

Comments: