



**SUN CHILD
CARE CENTRE**
小太陽天地

Staff:

Received Date:

Avenida Comercial de Macau Nos. 23 - 63 R/C,
Bloco A, Edif. Torre Lago Panorâmico, Macau
澳門商業大馬路 23 - 63 號湖畔名門地下 A 座
Tel 電話: (853) 2823 3800/Fax 傳真: (853) 2823 3100

Application Form

Operating Hours: Mondays - Fridays (08:00-17:00) Saturdays (08:00-12:00)		Full Month (Full Day)	Full Month (Half Day)	Half Month (Full Day)
	English Class			
	Chinese Class			

Child Information

	English Name	Family Name	First Name	Preferred Name	<input type="radio"/>	Male	<input type="radio"/>	Female
	Chinese Name			Macau ID/Passport No.				
	Date of Birth	(yyyy-mm-dd)		Address _____ _____ _____				
中 英 葡	Nationality							
	Major Spoken Language(s)							

Please indicate any special health conditions or illnesses of the child, e.g. food/drug allergies etc..

Remarks: Please indicate the details should your child has/had any significant illnesses, accidents, or surgeries. Additional sheets for detailed explanations are available (if necessary).

In case of emergencies, which of the following hospitals would you prefer us to send your child for consultation at first priority?

- S. Januário Hospital (CHCSJ)
 Kiang Wu Hospital
 Medical Centre of Kiang Wu Hospital (Taipa)
 Others (please specify):

Is this the first time your child entering nursery? If not, please specify the name of the nursery your child has attended and the reason for leaving.

- Yes
 No (please specify):

Any siblings of your child has attended/is attending at Sun Child Care Centre? If yes, please specify.

- Yes (please specify):
 No

Has your child ever attended any professional evaluations/assessments? If yes, please specify.

- Yes (please specify):
 No

FAMILY INFORMATION

		Father	Mother
Parents or Authorized Guardians	English Name	(Family Name)	(Family Name)
		(First Name)	(First Name)
	Chinese Name		
	Nationality		
	Phone Number (Home)		
	Phone Number (Mobile)		
	E-mail Address		
	Company	Occupation/Position	
Work Organization			
Phone Number (Work)			

1 st Emergency Contact Person	(Name)	(Relationship)	(Phone number)
2 nd Emergency Contact Person	(Name)	(Relationship)	(Phone number)

Please list all authorized persons for picking up the child (including parents or authorized guardians):

1	Name:	Relationship:	Phone Number :
2	Name:	Relationship:	Phone Number
Please specify If there are more than two pick-up persons:			
3	Name:	Relationship:	Phone Number :
4	Name:	Relationship:	Phone Number :
5	Name:	Relationship:	Phone Number :
6	Name:	Relationship:	Phone Number :

Remarks: Each child is provided with two pick-up cards.

From which major channel do you know about the Sun Child Care Centre?

<input type="checkbox"/>	Social Welfare Bureau	<input type="checkbox"/>	Facebook	<input type="checkbox"/>	WeChat
<input type="checkbox"/>	Instagram	<input type="checkbox"/>	Newspaper	<input type="checkbox"/>	Exhibition
<input type="checkbox"/>	Leaflet	<input type="checkbox"/>	Relatives/ Friends	<input type="checkbox"/>	SMS
<input type="checkbox"/>	Sun Child Care Centre Website	<input type="checkbox"/>	Suncity Group Employees		
<input type="checkbox"/>	Forum (Please specify):				
<input type="checkbox"/>	Others (Please specify):				

Do you agree to subscribe information of our Centre?

<input type="checkbox"/>	Agree	<input type="checkbox"/>	Disagree
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Personal Declaration

I hereby acknowledged that I clearly understood, confirmed and agreed to:

- The above data collected for the Sun Child Care Centre is only used for the purposes of records, communications and messaging services.
- Children must be one-year old or above to apply for nursery enrolment.
- An administrative/handling fee of MOP 800 (including enrolment and interview arrangement etc.) is required for application registration; the fee is non-transferable or non-refundable regardless of the application result.
- If the application is successful, our staff will contact the parents about the admission procedures. Registration and admission fees have to be settled by the specific deadline or will be deemed as forfeiting the placement.
- All paid fees including but not limited to nursery fee, administrative/handling fee and other fees are non-refundable. The Sun Child Care Centre reserves the rights to above terms and conditions for final discretion.

Name of Parents / Authorized Guardians		Signature of Parents / Legal Guardians & Date	
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