

APPLICATION FOR AFTER-SCHOOL ACTIVITIES

INFORMATION ABOU	JT THE PUPIL			
The child's	Child's name		Date of birth	
	Address			
	School		Year / grade	
	Allergies, illnesses, medication, et	C.	,	
	Other special considerations			
Preferred after-school	Juokslahti School	Kaipola School	Länkipohja School	
club	Kuorevesi School			<u> </u>
	Jämsänjoki School / Vitikka	Jämsänkoski School/Korp	of SCHOOL	3
				1
	Special support club, Jäms	änjoki School / Vitikkala School)>
				27
	A special support programme child	has been drafted for your	Yes No	1
	Cilia			1
0				
GUARDIAN'S INF			LD (() ()	
Billing information/	Parent name		Date of birth	
Parent's/guardian's information				
	Address		Telephone number	
	Addiess		releptione number	
	Parent name		Date of birth	
	Address		Telephone number	
Date and signature				

Form received:

Coordinator of after-school activities Minna Kinnunen, Kuorevesi School, Opinkuja 2, 35600 Halli **Enquiries:** Minna Kinnunen, tel. +35840 524 729