ECOLE INTERNATIONALE DU SAVOIR
Enfants d'aujourd'hui les pionniers de demain
Contacts : (+225) 07 17 72 72 72 / 01 40 12 52 52
Email : eiemeraudes@gmail.com

REGISTRATION FORM

Student first and last name : _____

Parent's first and last name : _____

Date of birth : _____

Phone : _____

Grade : _____

Email : _____

Selected activities :

Activity	Days	Hours	Check
Taekwondo	Tuesday	3pm – 4pm	☐
Visual Arts	Tuesday Friday	3pm – 4pm 3pm – 4pm	☐
Music (guitar, piano, vocal)	Wednesday	1pm – 2:30pm	☐
Maracana	Wednesday Friday	1pm – 2:30pm 3pm – 4pm	☐
Dance	Wednesday Friday	1pm – 2:30pm 3pm – 4pm	☐
Culinary Art	Wednesday Friday	1pm – 2:30pm 3pm – 4pm	☐
Robotic & Coding	Tuesday	3pm – 4pm	☐

Fees :

The cost of extracurricular activities is **30,000 FCFA per month** or **80,000 FCFA per term**.

Total for selected activities : [_____]

Total amount to be paid per term : [_____]

Payment of fees :

Payment can be made by cheque, cash, or bank transfer.

Fees must be paid before the start of the activity.

Autorisation parentale :

I authorize my child to participate in the extracurricular activities mentioned above.

Parent/Guardian's Signature:

_____

Date: _____

Medical Notes (if applicable):

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