



Lörrach

Änderung der Anmeldung für die Schulkindbetreuung an der Hellbergschule



Bei nachträglichen Änderungen in der Anmeldung müssen mindestens die roten Felder ausgefüllt sein.

Child

__Diese Änderung/Neuanmeldung soll am dd.mm.yyyy in Kraft treten :

Firstname:

Lastname:

Year:

Date of Birth:

School form:

- Halbtage
 Ganztage

My child is vaccinated against measles / already immune:

- Ja

Allergies:

Medications:

Please mark with a cross where applicable:

- | | |
|---|--|
| <input type="checkbox"/> My child is gluten intolerant | <input type="checkbox"/> My child is lactose intolerant |
| <input type="checkbox"/> My child doesn't eat pork | <input type="checkbox"/> My child is a vegetarian |
| <input type="checkbox"/> After the end of the booked care, my child is allowed to go home alone | <input type="checkbox"/> My child is allowed to take part in excursions |
| <input type="checkbox"/> My child can be creamed in the summer with available sunscreen | <input type="checkbox"/> Photos showing my child may be published in the public press as well as used for public relations of the supervising organizations. |
- __Betreuer dürfen bei meinem Kind Zecken entfernen

Hellbergschule - __Halbtage

Monday	Tuesday	Wednesday	Thursday	Friday
07:00 - 08:30 <input type="checkbox"/> book	07:00 - 08:30 <input type="checkbox"/> book	07:00 - 08:30 <input type="checkbox"/> book	07:00 - 08:30 <input type="checkbox"/> book	07:00 - 08:30 <input type="checkbox"/> book
12:00 - 13:00 <input type="checkbox"/> book	12:00 - 13:00 <input type="checkbox"/> book	12:00 - 13:00 <input type="checkbox"/> book	12:00 - 13:00 <input type="checkbox"/> book	12:00 - 13:00 <input type="checkbox"/> book
13:00 - 14:00 <input type="checkbox"/> book	13:00 - 14:00 <input type="checkbox"/> book	13:00 - 14:00 <input type="checkbox"/> book	13:00 - 14:00 <input type="checkbox"/> book	13:00 - 14:00 <input type="checkbox"/> book

Monday

Tuesday

Wednesday

Thursday

Friday

14:00 - 17:00 <input type="checkbox"/> book	14:00 - 17:00 <input type="checkbox"/> book	14:00 - 17:00 <input type="checkbox"/> book	14:00 - 17:00 <input type="checkbox"/> book	14:00 - 17:00 <input type="checkbox"/> book
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Parent or legal guardian

E-mail:

Phone number:

Firstname:

Lastname:

Street:

Address suffix:

Postcode:

City:

Gross household income per month:

- 0,-- bis 1.499,--
- 1.500,-- bis 2.499,--
- 2.500,-- bis 3.499,--
- 3.500,-- bis 5.999,--
- 6.000,-- bis 8.499,--
- 8.500,-- bis 10.999,--
- 11.000,-- bis 13.499,--
- 13.500,-- bis 14.999,--
- 15.000,-- bis 19.999,--
- über 20.000,--

I have at least one other child in a paid public kindergarten :

- Yes
- No

If yes, enter the name of the fee-paying kindergarten here :

Employment situation of parent or legal guardian:

- Single parent / legal guardian is working
- Single parent / legal guardian is a job-seeker
- Both parents / legal guardians are working
- Both parents / legal guardians are job-seekers
- One parent / legal guardian is working another is a job-seeker

I am a single parent or legal guardian:

- Yes
- No

Name of the emergency contact:

Telephone number for possible emergencies:

Other persons entitled to pick-up:

Account holder:

IBAN:

BIC:

I authorize the supervising organization **Gemeindekindergarten Brombach** to collect payments from my account by direct debit. At the same time, I instruct my credit institution, which will be **Gemeindekindergarten Brombach** pay debits drawn on my account.

I have read and accept the general terms and conditions of the **Stadt Lörrach** for school childcare.

I understand that my registration can be recalled by the organization if the care capacities are exceeded. There is no right to receive care.

I have read the privacy policy of **Stadt Lörrach** and agree that my data and the data of my children are electronically processed and passed on to the supervising organisation.

Datum	Unterschrift