

**Osaka YMCA International School
Summer Intensive Program 2011
Preschool Class Application Form**

NAME	Date of Birth	/ /
	Gender	age: M · F
Mother's Name		
Address	Zip	
	TEL : () —	E-Mail: @
Period	August 9 (Tue) ~ August 11 (Thu) 3 days	
Allergy	<input type="checkbox"/> Medicine () <input type="checkbox"/> Food () <input type="checkbox"/> Other ()	
Additional Information	Please let us know if there is any additional information relevant to this application that we should be aware of.	
Where did you hear about Osaka YMCA International School? <input type="checkbox"/> Internet <input type="checkbox"/> DM <input type="checkbox"/> Newspaper <input type="checkbox"/> Friend <input type="checkbox"/> Other ()		
Name of Parent / Guardian:		Signature:
Emergency Contact () —		
Copyright of your child's picture: I authorize that OYIS has permission to display my child's photographs for the website and media in perpetuity.		
Date:	Signature:	



- * Please complete the payment within two weeks of your application.
- * Please note the Refunds Policy below.

***Refunds**

Full	14 days before the term starts
50%	7 days 3pm before term starts
Not refundable	Any time after above

Sample Schedule

	DAY 1	DAY 2	DAY 3
09:30-10:00	GREETING	Songs & Dancing	
10:00-10:20	Activities & Exercises		
10:20-10:50	Gym Time		
10:50-11:20	Language Art	Cooking	
11:20-12:00	Arts and Crafts		
12:00-13:00	Lunch Time		
13:00-13:30	Story Time		