Registration form for childcare by the hour

Please mail to: kinderbetreuung@ash-berlin.eu



Name/Surname and Date of Birth	· · · · · · · · · · · · · · · · · · ·		Please note important	Information:
Parents' full names			months to school enrollm	tended for children aged 6 nent age. It applies for a full o a maximum of 4 hours per
Address			the availability of our care	
Telephone + email address			- We may not be able to accommodate all preferred dates.	
Weekday/s	Time from	to .	(max. 4hrs/ day!)	Which day/s is/are most important?

Monday	 	
Tuesday	 	
Wednesday	 	
Thursday	 	
Friday	 	

In which time period do y		. 1	
need care service?	from _	until	(please specify dates)

Reason for care requirement:

0	Seminar	0	BA-/MA thesis
0	Paper/ Exam	0	Other:

Further statement: ______

Date, place

Signature

Please note: We treat your and your child's personal data with strict confidentiality in accordance with data protection regulations. This information will be used exclusively for organizing child care purposes.