



Lead City International School

4, Baale Osuntoki Road, Jericho GRA, Ibadan
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NO: _____

REGISTRATION FORM

AFFIX
PASSPORT

Application for Admission into Junior School ☐ Middle School ☐
Senior School ☐ (Indicate the grade in the box provided)

-----Session

A. Personal Information

1. Surname..... Other Names.....
2. Date of Birth..... Gender.....
3. Nationality..... State..... Home Town.....
4. Religion..... Language.....
5. Home Address.....
6. Physical Peculiarity.....
7. Proposed Class..... Boarding ☐ Day ☐
8. Present School with date.....

B. Parents/ Guardian Information

1. Name of Father or Mother/Guardian.....
2. Occupation of Father or Mother/Guardian.....
3. Office Address of Father/Guardian.....
4. Home Address.....
5. Telephone No..... E-mail Address.....
6. Signature of Parent/Guardian.....
7. Father's Birthday (Day and Month)
8. Mother's Birthday (Day and Month).....
9. Wedding Anniversary Date.....

C. Medical Information

1. Immunizations Taken (Indicate) Yes or No
2. Allergy/Reaction to any food?..... Indicate.....
3. Allergy/Reaction to any drug?..... Indicate.....
4. Does your child/ward have any peculiar ailment?.....
If Yes, Please specify.....
5. Address of child's medical doctor in an emergency.....
..... Phone No.....

NOTE: Photocopies of birth certificate and immunization certificate must be attached.

D. Internal Use

1. Class admitted into.....
2. Photocopies of certificates attached.....
3. Head Teacher's signature.....