



Enrollment Packet 1号申し込み書類

ふりがな

Date of birth

Name _____ 生年月日 _____

Address: 長野県千曲市内川 580-1

Phone: 080-4834-7703

Email: ake.academy@gmail.com

Website: alphabetkidsenglish.com

Alphabet Kids is an international preschool providing
childcare and education for kids ages 3-6.

Alphabet Kids インターナショナル保育園は1歳から5歳のお子さんの
教育と保育をする地方裁量型認定こども園です。

Alphabet Kids Enrollment Packet

Basic Information

記入日

Application Date _____

入園日 (通い始め 1 日目)

Start Date (first day of school) _____

Child's name _____

☐ M

☐ F

DOB 生年月日 _____

Age ____ years ____ months

Child's nickname

子供名の英語綴り (名札や書き練習用)

How would you like your child's name to appear on name tag/learn to write?

Address _____

Parent name _____

続柄

Relation _____

DOB 生年月日 _____

Phone _____

Address (If different) _____

Parent name _____

続柄

Relation _____

DOB 生年月日 _____

Phone _____

Address (If different) _____

Others living in household (pets too!)

Name/Age _____

Relation _____

Name/Age _____

Relation _____

Name/Age _____

Relation _____

Name/Age _____

Relation _____

Name/Age _____

Relation _____

Name/Age _____

Relation _____

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Child Information

Child's name _____

家庭で話される言葉

Language spoken at home ☐ Japanese ☐ English ☐ Other _____

文化の習慣や宗教について園にお知らせしたいこと。（飲食できないもの、特別な服装など）

Are there any cultural or religious practices of your family we should be aware of? (dietary restrictions, clothing, head coverings, etc.) _____

最近何か大きな変化を経験しましたか？（独り寝、離婚、ペットや知り合いの死、母の妊娠など）

Are there any changes or transitions that your child has recently experienced or is experiencing? (moved from crib to bed, divorce, new home, death of family member or pet, mom is expecting, etc.) _____

性格や生活習慣について園にお知らせしたいこと。（恥ずかしがり、敏感、寝かしつけなど）

Are there personality and behavior characteristics that would be useful to know about your child? (shy, energetic, sensitive, etc.) _____

お子さんが怖がるものはありますか？どのように反応し、また、どう対応してますか？

Are there things that frighten your child? If so, how does he/she react and what do you do to comfort him/her? _____

入園するにあたって心配なことや不安はありますか？

What might you and/or your child be anxious about as he/she starts in this program? _____

当プログラムへの期待をお聞かせください。

What are your expectations of this program? _____

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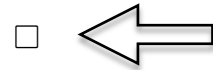
Participation and Tuition

Child's name _____

<u>Book Fee</u> (Please check one)		
年度一括		
教育関連費 Yearly payment	¥ 30,000	☐
(for April enrollees only)		
月払い Monthly payment	¥ 3,000/mo	☐
<u>Tuition</u> (Please check one)		
教育利用 Mornings only	Free*	☐
8:30~12:30		
一日参加 Full day		
8:30~15:30	¥ 10,000/mo	☐
8:30~16:30	¥ 20,000/mo	☐
延長保育 Late care	(延長利用料金表参照)	☐
<u>Lunch Fee</u> (Please check one)		
Mornings only	¥ 5,000/mo	☐
Full day	¥ 6,000/mo	☐
特定負担額		
<u>Activities Fee</u>	¥ 2,000/mo	☐

English Scholarship Program

Please check here if applying for the English Scholarship Program.



For qualifying applicants, Tuition, Lunch Fee, and Activities Fee may be waived or reduced.

登降園予定 Drop off/Pick up Plan

Mon ____ : ____ / ____ : ____
 Tue ____ : ____ / ____ : ____
 Wed ____ : ____ / ____ : ____
 Thur ____ : ____ / ____ : ____
 Fri ____ : ____ / ____ : ____

初月利用料金合計額
First Month's Payment

¥ _____

翌月以降利用料金月額
Monthly Payment

¥ _____

送迎者
People Authorized for Pick up

Name _____

Phone _____

Name _____

Phone _____

Name _____

Phone _____