



# INTERNATIONAL ACADEMY OF SURINAME

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Network of International  
Christian Schools

## Re-Enrollment for 2010-2011

Student's Name \_\_\_\_\_

Student's Name \_\_\_\_\_

Student's Name \_\_\_\_\_

New Address? \_\_\_\_\_

Do you have a new phone number?

Father Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

Mother Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

Do you have an email address?

Father's email \_\_\_\_\_

Mother's email \_\_\_\_\_

Please reconfirm your emergency address, emergency contact information  
(telephone number/relation to family), medical conditions, allergies.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The first tuition payment is due the first day of school. Completing and returning this form to the school office will reserve a place for your child for the 2010/2011 school year.



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