

Änderung der Anmeldung für die Schulkindbetreuung an der Jahnschule Bad Tölz



Bei nachträglichen Änderungen in der Anmeldung müssen mindestens die roten Felder ausgefüllt sein.

Child

Firstname:

Lastname:

Year:

Date of Birth:

School form:

☐

Halbtag

☐

Ganztag

My child is vaccinated against measles / already immune:

☐

Ja

Allergies:

Medications:

Please mark with a cross where applicable:

☐

My child is gluten intolerant

☐

My child is lactose intolerant

☐

My child doesn't eat pork

☐

My child is a vegetarian

☐

After the end of the booked care, my child is allowed to go home alone

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My child is allowed to take part in excursions

☐

My child can be creamed in the summer with available sunscreen

☐

Photos showing my child may be published in the public press as well as used for public relations of the supervising organizations.

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Betreuer dürfen bei meinem Kind Zecken entfernen

Jahnschule Bad Tölz - Ganztag

Monday

Tuesday

Wednesday

Thursday

Friday

08:00 - 14:00 ☐ book	08:00 - 12:55 ☐ book	08:00 - 12:55 ☐ book	08:00 - 12:55 ☐ book	08:00 - 12:55 ☐ book
08:00 - 15:45 ☐ book	08:00 - 14:00 ☐ book	08:00 - 14:00 ☐ book	08:00 - 14:00 ☐ book	08:00 - 15:00 ☐ book
08:00 - 12:55 ☐ book	08:00 - 15:45 ☐ book	08:00 - 15:45 ☐ book	08:00 - 15:45 ☐ book	08:00 - 14:00 ☐ book

Parent or legal guardian

E-mail:

Phone number:

Firstname:

Lastname:

Street:

Address suffix:

Postcode:

City:

Employment situation of parent or legal guardian:

- ☐ Single parent / legal guardian is working
- ☐ Single parent / legal guardian is a job-seeker
- ☐ Both parents / legal guardians are working
- ☐ Both parents / legal guardians are job-seekers
- ☐ One parent / legal guardian is working another is a job-seeker

I am a single parent or legal guardian:

- ☐ Yes
- ☐ No

Name of the emergency contact:

Telephone number for possible emergencies:

Other persons entitled to pick-up:

Beziehen Sie Leistungen nach dem SGB II, SGB XII, AsylbLG, Wohngeld oder Jugendhilfe:

- ☐ Yes
- ☐ No

Account holder:

IBAN:

BIC:

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I authorize the supervising organization Marie-Luise-Schultze-Jahn. Trägerverein Betreuung e. V. to collect payments from my account by direct debit. At the same time, I instruct my credit institution, which will be Marie-Luise-Schultze-Jahn. Trägerverein Betreuung e. V. pay debits drawn on my account.

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I have read and accept the general terms and conditions of the Marie-Luise-Schultze-Jahn. Trägerverein Betreuung e.V. for school childcare.

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I understand that my registration can be recalled by the organization if the care capacities are exceeded. There is no right to receive care.

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I have read the privacy policy of Marie-Luise-Schultze-Jahn. Trägerverein
Betreuung e.V. and agree that my data and the data of my children are
electronically processed and passed on to the supervising organisation.

Datum	Unterschrift