

**Non-binding request for your child care place at Kita Chinderstern**  
(child is as of Kindergarden age)

Intended entry date .....

Name of Kita Chinderstern .....

**Child's personal data**

Surname / first name .....

Date of birth .....

**Choose intended weekdays**

We recommend booking at least one whole day a week, as this brings stability to the child's life.

	Monday	Tuesday	Wednesday	Thursday	Friday
Morning module 1 06:45 – 08:00					
Morning module 2 06:45 – 09:00					
Whole Morning					
Lunch					
Afternoon					

**Parent's / legal guardian's personal data**

Surname .....

First name .....

Street address .....

Postal code / city .....

Phone .....

E-mail .....

**Please note that this reservation does not automatically guarantee a place at Kita Chinderstern.**

Place and date

Signature

.....

.....