



# BUKIT PANJANG METHODIST CHURCH KINDERGARTEN

卫理公会武吉班让堂幼稚园

488 Upper Bukit Timah Road, Singapore 678091

Tel: 6760 7662 Email: kinder@bpmck.org.sg

## REGISTRATION FORM

### I. STUDENT'S PARTICULARS

*Note* : Please complete Part I in **BLOCK LETTERS**.

Name as in Birth Certificate (Underline Surname):		Chinese characters (if applicable):	
Birth Cert / Fin No.	Date of Birth :	Country of Birth:	Gender: * Male/Female
Nationality/Citizenship : * Singaporean / S'pore PR / Foreigner		Birth Order : * 1st / 2nd / 3rd / 4th	No. of Siblings :
Level : * N1 / N2 / K1 / K2	Preferred Session: **3.5 / 6-hr**	Race : <input type="checkbox"/> Chinese <input type="checkbox"/> Indian <input type="checkbox"/> Eurasian <input type="checkbox"/> Others	
Residential Address	Postal Code ( )		
Contact No (Home)		Mobile	
First language spoken at home	<input type="checkbox"/> English <input type="checkbox"/> Mandarin <input type="checkbox"/> Tamil <input type="checkbox"/> Others		
Payment Mode for Subsequent School Fees:	<input type="checkbox"/> CDA: *DBS/POSB / OCBC / UOB <input type="checkbox"/> GIRO <input type="checkbox"/> Chq <input type="checkbox"/> PayNow		
Pre-school currently attending / attended previously:			

\* Delete accordingly

\*\*6-hr session is only available for N2, K1 & K2 level\*\*

### II. MEDICAL BACKGROUND/ AUTHORISED PICK-UP PERSON(S)/ EMERGENCY CONTACT

Does your child have any developmental delays and/ or disabilities? If yes, please specify:			
<input type="checkbox"/> Speech	<input type="checkbox"/> Vision	<input type="checkbox"/> Hearing	<input type="checkbox"/> Movement <input type="checkbox"/> Others
Does your child have any special needs? (if yes, please describe and/or attach medical report)			
Does your child have any allergies? (if yes, please specify):			
Name & contact of family doctor (if any):			
Emergency contact person & no. (other than the parents):			
Authorized pick-up person(s) for your child. Please indicate even if it is father and/ or mother.			
1)	Relationship:	NRIC:	Contact:
2)	Relationship:	NRIC:	Contact:

\*Important\*: Please update the school if there is any change in the authorized pick-up person(s).

### III. INFORMATION ON SIBLING(S)

Sibling(s) information (if from BPMC Kindergarten):

Name / Level / Class / Session:
Final year in the Kindergarten:

### IV. PARENT'S / GUARDIAN'S PARTICULARS

Parent Particulars	Father	Mother	
Name			
NRIC /Passport No			
Highest Qualification			
Occupation			
Citizenship			
Office No. (if any)			
Mobile No.			
Email Address			
Religion			
Church (if attending)			
<b>Guardian's Particulars:</b>			
Name		Relationship with child	
Language (s) spoken with child			
Address (if different from above)			Postal Code
Residence Tel No.		Mobile No.	

Remarks (if any) \_\_\_\_\_

1. I declare that the particulars given in this form are true and correct.
2. I shall inform the Kindergarten should there be any changes in the particulars/ contact.
3. I understand that the session allocated (AM or PM) in the first year of study does not warrant that my child will be given the same or preferred session in subsequent year(s).
4. The registration fee is a non-refundable item.
5. In case of emergency, the school will act in the best interest of my child in seeking medical attention at the nearest clinic or hospital.

*I understand and accept the terms of registration and that any false information may result in this application being rejected and/ or withdrawal of my child's place by the school.*

.....  
Name & Signature

.....  
Date

For Official Use Only				
Class		Date of Commencement		
N1	N2	K1	K2	Mode of Payment PayNow /Cash
3.5hr / 6-hr		Receipt No.	Amount Paid	



## BUKIT PANJANG METHODIST CHURCH KINDERGARTEN

卫理公会武吉班让堂幼稚园

488 Upper Bukit Timah Road, Singapore 678091

Tel: 6760 7662 Email: kinder@bpmck.org.sg

**PLEASE READ THE TERMS AND CONDITIONS BEFORE SIGNING - SCHOOL'S COPY**

### **1. Session of Study:**

The study session offered is a 3.5hr and 6hr programme. The 6hr session is offered to N2 to K2 children.

**2.Fee & Refund Policy:** All fees paid to the Centre are **strictly non-refundable and non-transferable**, under any circumstances, including but not limited to withdrawal, absence, suspension, or termination of enrolment.

\*\* This includes **Registration Fee, School Fees, Deposit, Miscellaneous Fees, any other payments made to the Centre.**

**3.Registration Fee & Deposit:** A registration fee of **\$60.00** and a deposit of **\$400** is payable upon registration and confirmation of a place. However, the **deposit** will be used to offset against your **child's last term school fee in K2.**

### **4.Withdrawal of Existing Students:**

Twelve (12) weeks' written notice is required, **not including** school holidays in March, June, September and December, should you decide to withdraw your child before graduation. For withdrawal, please put in an official withdrawal form obtainable from the school. There will be **no refund of deposit for insufficient notice of withdrawal.**

### **5. Children with Special Needs:**

BPMC Kindergarten is a mainstream kindergarten with qualified pre-school teachers who may not be specially trained in special needs. In the event of a child with special needs but the school is not informed or if the child is assessed to have special needs after joining, depending on the situation, the Kindergarten reserves the right to de-register the child for the overall learning needs and development of the entire class of children.

**By signing this registration form, parents/guardians acknowledge and agree to the above terms and conditions.**

\_\_\_\_\_  
Name of Parent/ Signature

\_\_\_\_\_  
Date

(updated 11.2.2026)



## BUKIT PANJANG METHODIST CHURCH KINDERGARTEN

卫理公会武吉班让堂幼稚园

488 Upper Bukit Timah Road, Singapore 678091

Tel: 6760 7662 Email: kinder@bpmck.org.sg

**PLEASE READ THE TERMS AND CONDITIONS BEFORE SIGNING - PARENT'S COPY**

### **1. Session of Study:**

The study session offered is a 3.5hr and 6hr programme. The 6hr session is offered to N2 to K2 children.

**2.Fee & Refund Policy:** All fees paid to the Centre are **strictly non-refundable and non-transferable**, under any circumstances, including but not limited to withdrawal, absence, suspension, or termination of enrolment.

\*\* This includes **Registration Fee, School Fees, Deposit, Miscellaneous Fees, any other payments made to the Centre.**

**3.Registration Fee & Deposit:** A registration fee of **\$60.00** and a deposit of **\$400** is payable upon registration and confirmation of a place. However, the **deposit** will be used to offset against your **child's last term school fee in K2.**

### **4.Withdrawal of Existing Students:**

Twelve (12) weeks' written notice is required, **not including** school holidays in March, June, September and December, should you decide to withdraw your child before graduation. For withdrawal, please put in an official withdrawal form obtainable from the school. There will be **no refund of deposit for insufficient notice of withdrawal.**

### **5. Children with Special Needs:**

BPMC Kindergarten is a mainstream kindergarten with qualified pre-school teachers who may not be specially trained in special needs. In the event of a child with special needs but the school is not informed or if the child is assessed to have special needs after joining, depending on the situation, the Kindergarten reserves the right to de-register the child for the overall learning needs and development of the entire class of children.

**By signing this registration form, parents/guardians acknowledge and agree to the above terms and conditions.**

\_\_\_\_\_  
Name of Parent/ Signature

\_\_\_\_\_  
Date

(updated 11.2.2026)

-----