Tallinna Linnupesa Kindergarten

Application

|  |  |
| --- | --- |
| Child’s first and last name |  |
| Child’s personal identification code |  |
| Address |  |
| Put on the list from (date) |  |

|  |  |
| --- | --- |
| Kindergarten fee payer (name) |  |
| Personal identification code |  |
| Address |  |
| e-mail (where to send the bill) |  |
| Phone |  |

I am obligated to pay the kindergarten fee montly according to the amout that’s on the bill.

|  |  |
| --- | --- |
| Date |  |
| Name/signature |  |