

# ENROLMENT CONTRACT

Enrolment beginning \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 Month Year

## STUDENT INFORMATION

**Name** \_\_\_\_\_ Male \_\_\_\_ Female \_\_\_\_  
 Family Name First Name Middle Name(s)  
**Date of Birth** \_\_\_\_ / \_\_\_\_ / \_\_\_\_ **Nationality (ies)** \_\_\_\_\_  
 Day Month Year  
**Country of Birth** \_\_\_\_\_ **Principal language spoken at home** \_\_\_\_\_  
**Home Address (Germany)** \_\_\_\_\_  
 Street Postal Code Town/City  
**Telephone** \_\_\_\_\_ **Main Contact E-mail** \_\_\_\_\_  
**Present School** \_\_\_\_\_ **Grade/Year at present school** \_\_\_\_\_  
**Brothers and sisters currently enrolled at or applying to ISF:**  
 Names: 1) \_\_\_\_\_ Grade \_\_\_\_ 2) \_\_\_\_\_ Grade \_\_\_\_ 3) \_\_\_\_\_ Grade \_\_\_\_

## ADDRESS FOR IMMEDIATE CORRESPONDENCE (if different from above)

Tel. No. \_\_\_\_\_ E-mail \_\_\_\_\_ Until when? \_\_\_\_\_

## PREVIOUS SCHOOLS (last 2 schools)

Name of School	Country	Dates attended
_____	_____	_____
_____	_____	_____

☐ I/we hereby give ISF permission to contact previous schools.

Has a grade/class/year ever been repeated? ☐ Yes ☐ No or skipped? ☐ Yes ☐ No

Does the student, to your knowledge, have any particular learning disabilities? ☐ Yes ☐ No

## LANGUAGE BACKGROUND

	English	German	French	Spanish	Korean	Other
Native speaker	_____	_____	_____	_____	_____	_____
How many years	_____	_____	_____	_____	_____	_____
No knowledge	_____	_____	_____	_____	_____	_____

Students applying for Grades 6 to 9 should indicate their preferred language choice: French ☐ Spanish ☐

(French and Spanish are offered as a foreign language only)

## PARENT INFORMATION

**Father** (or male guardian) \_\_\_\_\_ Mobile No. \_\_\_\_\_  
Family Name First Name

Nationality (ies) \_\_\_\_\_ Native language \_\_\_\_\_

Father's Main E-mail \_\_\_\_\_

Father's Home Address (if different to student's) \_\_\_\_\_

Father's Work (Co. Name and Address) \_\_\_\_\_

Business Tel. No. \_\_\_\_\_

**Mother** (or female guardian) \_\_\_\_\_ Mobile No. \_\_\_\_\_  
Family Name First Name

Nationality (ies) \_\_\_\_\_ Native language \_\_\_\_\_

Mother's Main E-mail \_\_\_\_\_

Mother's Home Address (if different to student's) \_\_\_\_\_

Mother's Work (Co. Name and Address) \_\_\_\_\_

Business Tel. No. \_\_\_\_\_

**Unless otherwise notified, school reports will be sent to student's home address**

## EMERGENCY CONTACT

Please provide a daytime emergency contact name and telephone number (other than parents):

Name: \_\_\_\_\_ Tel. \_\_\_\_\_

## PARENTAL AUTHORITY

Please indicate who is legally responsible for the student named in this contract:

☐ Father/Guardian ☐ Mother/Guardian ☐ Both parents

Student lives with:

☐ Father/Guardian ☐ Mother/Guardian ☐ Both parents

## AUTHORISATION

Information on these forms will be held in strict confidence. We use your and your child's personal data in accordance with the General Data Protection Regulation and with the §83 Education Act of the State of Hesse (HSchG) with regard to the collection and processing of personal data in schools.

## EXEMPTION PERMIT (Ausnahmegenehmigung)

According to the law of the Federal State of Hesse, every school-age student resident in Hesse who is registered at ISF School as a German national and attends Grades 1-9, i.e., students whose sixth birthday falls on or before June 30<sup>th</sup> of the year of enrolment, must be in possession of an official exemption ("Ausnahmegenehmigung" – Exemption Permit) from their local education office ("Schulbehörde").

## ENROLMENT DOCUMENTS

Applications for enrolment should be addressed to:

ISF International School Frankfurt Rhein-Main Verwaltungs-GmbH  
Strasse zur Internationalen Schule 33  
65931 Frankfurt  
Germany  
Tel. +49 (0)69 9543190 Fax +49 (0)69 954319-799 E-mail: Registrar@isf-sabis.net

The following documentation should be included. **Applications cannot be processed until all documents are received.**

- Enrolment Contract
- Student Medical Form
- Copy of birth certificate and/or passport to verify date of birth and citizenship
- Copy of school reports of the last two years (if applicable)

## GENERAL CONTRACT CONDITIONS

1. When signed by the parents or guardians and ISF International School Frankfurt Rhein-Main Verwaltungs-GmbH ("ISF"), the (Re-)Enrolment Contract (the "Contract") is valid for the period of one school year. At the end of each school year, the Contract will terminate without written notice. For continued enrolment at ISF School, the school operated by ISF, a new Re-enrolment Contract must be signed by both parties for each school year.
2. Though ISF and ISF School will use their best efforts to assess the case of each student applying for admission to ISF School based on the merits of each case separately, this assessment does not constitute nor may it be construed as an obligation of ISF or ISF School to meet or provide a respective student's individual support needs (whether educational, medical, therapeutic, or otherwise), and neither ISF nor ISF School are obliged to provide specific additional support beyond the ordinary scope offered at ISF School, nor any specific school facilities or building specifications, or a specific education program.
3. The Contract will be null and void if the ISF School Director does not accept a student.
4. When signed by both parties, the Contract obliges the parents or guardians to meet their financial commitments to ISF in accordance with the Tuition and Fees Schedule. Details of the amount and payment conditions are included in the Tuition and Fees Schedule for the year, which constitutes an integral part of the Contract.
5. Although ISF/ISF School is ready to discuss the grade placement of a student with the parents or guardian, ISF/ISF School's decision regarding the grade placement is binding, irrespective of the grade level for which the application is made.
6. The Contract can be terminated by ISF without prior notice and with immediate effect if:
  - a) Information pertinent to the acceptance of the student (e.g. disciplinary action taken at other schools, reason for departure from other schools, requirement for specialist educational services, etc.) is withheld or false/inaccurate.
  - b) The student named in the Contract has committed an act of criminal or serious disorderly nature, which affects the ordinary functioning, or discipline of ISF School. In this case, ISF School is entitled to search the belongings and clothes of the student concerned and confiscate any items connected with criminal or disorderly conduct. It is at ISF School's discretion to apply appropriate disciplinary measures, including expulsion of the student from the school, in the case of a student committing a criminal act or behaving in a seriously inappropriate manner.
  - c) A parent or guardian of the student named in this contract repeatedly acts in such a way as to adversely affect the ordinary functioning and administration of ISF School and, despite being cautioned, continues to do so.
  - d) After one reminder, the School Place Reservation Fee and /or Tuition fee payments have not been paid, or if instalments of the afore-mentioned fees are overdue.
  - e) After one reminder, the student continues to violate the behaviour expectations set out in the Code of Conduct in the ISF Student-Parent Handbook. The undersigned hereby confirms to have received a copy of the Student Parent Handbook, which is also shown and can be downloaded on the ISF website.

In case of termination with immediate effect, the full year's School Place Reservation Fee and Tuition Fees are due.

7. In the case of unforeseen circumstances that require parents/guardians to remove a student during the school year, the parents/guardians should immediately inform ISF or ISF School. In such a case, and only if the parents/guardians inform ISF or ISF School's administration **in writing one month before the beginning of the next term\***, any tuition paid in advance for the unattended academic term(s) shall be refunded by ISF.
8. The provision of food and drinks to students as well as transportation of the students is not part of the Contract. Neither ISF nor ISF School take any legal responsibility for such services provided by third parties. The same applies for food and drinks provided by parents or third parties for school events and consumed on the school premises.
9. All students enrolled at ISF School must live with and be under the care and supervision of a parent or legal guardian during the entire period of enrolment at ISF School.
10. The Contract and these General Contract Conditions are subject to the laws of the Federal Republic of Germany only. To the extent legally possible, the courts of Frankfurt am Main shall have exclusive jurisdiction for any disputes arising out of or in connection with the Contract and these General Contract Conditions.
11. **The Contract is valid only if arrangements have been made for the reservation of a school place with the mother company, ISF GmbH & Co. KG, Richard-Weidlich-Platz 3, 65931 Frankfurt, Tel. 069 30039511.**

## TUITION FEES

Payable to:

### ISF International School Frankfurt Rhein-Main Verwaltungs-GmbH

Strasse zur Internationalen Schule 33, 65931 Frankfurt am Main, Germany

Tel. +49 (0)69 954319-710 Fax +49 (0)69 954319-799 E-Mail: [registrar@isf-sabis.net](mailto:registrar@isf-sabis.net)

Details of the amount and payment conditions are included in the Tuition and Fees Schedule valid for the school year for which this enrolment application is made and which constitutes an integral part of this contract.

Tuition fees will be paid by ☐ Parents ☐ by direct debit \* ☐ by bank transfer  
or by ☐ Company (please give details below)

\*Please submit completed SEPA Direct Debit Mandate (valid only for tuition fee payment) with the Enrolment Contract

Company Name \_\_\_\_\_ Department \_\_\_\_\_

Contact Person \_\_\_\_\_ Tel. No. \_\_\_\_\_ E-mail \_\_\_\_\_

Address \_\_\_\_\_  
Street Postal Code Town/City

## SIGNATURE PARENT(S)/GUARDIAN(S)

The information provided on this Enrolment Contract is true and correct and no information has been withheld.

We have read and understood the 'General Contract Conditions'. We, the undersigned, agree to abide by the school rules and regulations and will encourage the adherence of the school rules and regulations by the student. We understand that failure to comply with these rules and regulations can result in the termination of this contract.

Signatures of Parent(s)  
or Guardian(s) \_\_\_\_\_

Place \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Day Month Year

## SIGNATURE SCHOOL

Signature of ISF International School Frankfurt Rhein-Main Verwaltungs-GmbH

Place \_\_\_\_\_

School Director \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Day Month Year

## SCHOOL PLACE RESERVATION FEE

Payable to\*\*:

### ISF International School Frankfurt Rhein-Main GmbH & Co. KG

Richard-Weidlich-Platz 3, 65931 Frankfurt, Germany

Tel. +49 (0)69 30039511 Fax +49 (0)69 30039508 E-Mail: [office@ISF-net.de](mailto:office@ISF-net.de)

Details of the amount and the payment conditions are included in the School Place Reservation Fee Schedule which constitutes an integral part of this contract and a copy of which is attached hereto.

School Place Reservation Fee will be paid by: ☐ Parents ☐ Company\*\*

## SIGNATURE PARENT(S)/GUARDIAN(S)

We, the undersigned, agree to make arrangements for the reservation of a school place.

Signature of Parent(s)  
or Guardian(s) \_\_\_\_\_

Place \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Day Month Year

# STUDENT MEDICAL FORM

Student ID (completed by the school): \_\_\_\_\_

Student Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Family Name First Name Day Month Year

German Home Address \_\_\_\_\_  
Street Post Code Town/City

Parents (or guardians) Home Tel No. \_\_\_\_\_

Name Mr. Tel Work Mobile \_\_\_\_\_

Name Ms. Tel Work Mobile \_\_\_\_\_

Emergency Contact \_\_\_\_\_  
Name Tel. No.

Medical Insurance Company \_\_\_\_\_ Policy Number \_\_\_\_\_  
Krankenversicherung Mitgliedsnummer

Does your child suffer from any of the following conditions? <i>Leidet Ihr Kind an einer der folgenden Krankheiten?</i>	yes/no <i>ja/nein</i>	Previous Illnesses <i>Frühere Krankheiten</i>	yes/no <i>ja/nein</i>	Immunisation <i>Impfung</i>	Month/Year (most recent vaccination) <i>Monat/Jahr (letzte Impfung)</i>
Asthma <i>Asthma</i>		Chickenpox <i>Windpocken</i>		Polio <i>Kinderlähmung</i>	
Diabetes <i>Diabetes</i>		Ear Infections <i>Ohrinfektionen</i>		Diphtheria <i>Diphtherie</i>	
Eczema/Neurodermatitis <i>Hautkzern/Neurodermitis</i>		Frequent Colds <i>Häufige Erkältungen</i>		Tetanus/Booster <i>Tetanus/Auffrischimpfung</i>	
Epilepsy <i>Epilepsie</i>		Measles <i>Masern</i>		Pertussis (Whooping Cough) <i>Keuchhusten</i>	
Hay Fever <i>Heuschnupfen</i>		Mumps <i>Mumps</i>		<b>Measles*</b> , Mumps, Rubella (MMR) <b>Masern*</b> , Mumps, Röteln	
Hearing Difficulties <i>Schwerhörigkeit</i>		Rubella (German Measles) <i>Röteln</i>		Hepatitis B <i>Hepatitis B</i>	
Heart Disorders <i>Herzstörungen</i>		Scarlet Fever <i>Scharlach</i>		Pneumococcal disease <i>Pneumokokken</i>	
Speech Impediment <i>Sprachfehler</i>				Meningitis <i>Meningokokken</i>	
Visual problems/Glasses <i>Sehstörungen/Brille</i>				Chicken Pox <i>Windpocken/Varizellen</i>	
				Covid-19 (please give all vac. dates) <i>Covid-19 (bitte alle Impfdaten nennen)</i>	

Surgeries/Operations (type/date): <i>Operationen (Art/Datum):</i>	
Allergies (if yes, which?): <i>Allergien (wenn ja, welche?):</i>	
Other Physical or Mental Health Conditions (present or past): <i>Andere physische oder psychische Erkrankungen (vergangen oder gegenwärtig):</i>	

	Yes/Ja	No/Nein
Does the school have your permission to take your child to the nearest hospital in case of emergency? <i>Erteilen Sie der Schule Ihre Genehmigung im Notfall Ihr Kind ins nächste Krankenhaus zu fahren?</i>	<input type="checkbox"/>	<input type="checkbox"/>
Does the school have permission to give your child non-prescription medication for example Paracetamol (Tylenol)? <i>Erteilen Sie der Schule die Genehmigung Ihrem Kind nicht-verschreibungspflichtige Medikamente (z.B. Paracetamol) zu geben?</i>	<input type="checkbox"/>	<input type="checkbox"/>
Does your child routinely take medication? <i>Nimmt Ihr Kind zurzeit Medikamente?</i>	<input type="checkbox"/>	<input type="checkbox"/>
If yes, please give brief details: <i>Wenn ja, bitte nähere Angaben:</i>	_____	
Is there any reason for your child to have restricted physical activity, including swimming? <i>Liegen Gründe für die eingeschränkte Teilnahme am Sportunterricht, inklusive Schwimmen, vor?</i>	<input type="checkbox"/>	<input type="checkbox"/>
If yes, please explain: <i>Wenn ja, bitte erläutern:</i>	_____	

Signature of parents/guardians \_\_\_\_\_ Date \_\_\_\_\_  
Day Month Year