

EUI CRÈCHE REGISTRATION FORM

I the undersigned

Professor Staff member Researcher Fellow other

Department/Service..... Reference person at the E.U.I.....

Wish to register my child (children):

Name	First name	Date of birth	Nationality
.....
.....
.....
.....

For the crèche of the European University Institute for the academic year: **2020/2021**

Planned attendance : **REGULAR** **OCCASIONAL**

➤ I declare that I have taken note of the fees and accept the rules on the running of the crèche as of Decision 2/18 of the Secretary General ([Decision 2/18](#))

➤ I declare that the parents **joint monthly net** income coincides with:

A **B** **C** **D** **E** *(rates)*

For the purpose of establishing the monthly fee due

(The Administration and HR Service, in case of necessity, will request documents proving the declared income. In case this is not provable, rate E will be applied). For more detailed information on personal data processing at the EUI please consult the following link:

<http://www.eui.eu/About/DataProtection/>

Methods of payment:

- I authorize the sum owed to be deducted from any payment due to me.**
- I undertake to pay the cash office within 30 days of receiving the bill.**

In order to settle my debts, I will inform the Real Estate & Facilities Service (gloria.peruzzi@eui.eu) at least 30 days before my departure from the Institute

Address in Florence:

E-mail Mobile phone

Telephone number for emergencies

Florence,..... Signature_____