DISCOVER. EMBRACE. INSPIRE.

CRESTVIEW INTERNATIONAL SCHOOL

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AD-F05

SEAT RESERVATION FORM

Blank form · please print clearly in capital letters or type

CHILD AND SEAT REQUESTED

Child's full name		Nickname	
Date of birth		Parent / guardian name	
Mobile		Email / LINE ID	
Grade reserved		Academic year	
Semester		Start date	
Status at time of reservation			

RESERVATION PAYMENT

Reservation fee: THB 30,000. Please pay at the Front Office or by transfer, then attach the slip.

Payment method		Payment date	
Payment slip	☐ **Attached**		

RESERVATION TERMS

☐ I have read and agree to the reservation terms.

Parent / guardian: type your full name to sign _____