

- The fee for a short stay in the boarding program is RM160 per day per student which will be charged to the parents' school account. The fee includes lodging and all meals; towels and linens are provided.
- At least one parent is expected to meet personally with the dorm parents before they leave their student in the dorm.
- If a student needs to stay beyond their reservation, parents should contact the dorm parents in advance. If students are left in the dorm beyond their reservation date without communication from the parents, the additional days will be charged at the daily rate plus 25%.

Name of Student: \_\_\_\_\_

Student's Age \_\_\_\_\_ Grade: \_\_\_\_\_

Passport number: \_\_\_\_\_ Country of Issue: \_\_\_\_\_

Name of Parents: \_\_\_\_\_

Contact Number and Email of Parents: \_\_\_\_\_

Home Address of Parents: \_\_\_\_\_

Address of Parents during Short Stay: \_\_\_\_\_

Contact Number of Parents during Short Stay: \_\_\_\_\_

Requested Dates of Short Stay: \_\_\_\_\_

Reason for Request:

\_\_\_\_\_  
\_\_\_\_\_

### Special Instructions

\_\_\_\_\_  
\_\_\_\_\_

### Medical Information

Insurance Policy and Policy Number: \_\_\_\_\_

Student's medical restrictions or allergies: \_\_\_\_\_

Emergency Contact Name and Number: \_\_\_\_\_

### Student Commitment

I understand and agree to support and obey the values, guidelines and rules stated in the Residence Life Handbook. I will respect and obey Dalat School Residence Life staff members and show mutual respect for the dorm students.

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Statement of Temporary Legal Guardianship/Medical Release

*This authorizes Dalat International School Residence Life staff to act as temporary legal guardians for our child while he/she is residing in the Residence Life Program. The dorm parents are hereby authorized to act for us in matters related to Dalat School, medical and dental needs, as well as legal matters that might arise and need immediate attention. In the event of any emergency, the dorm parents will attempt to contact us as soon as possible to involve us in the decision making process regarding the care of our child. If in the opinion of a properly licensed and practicing physician, my child needs medical or surgical services, which require my consent before being supplied, and I cannot be reached, I hereby authorize, appoint and empower the Dalat School boarding staff to make medical decisions regarding my child. Further, I release the boarding staff and Dalat International School Sdn. Bhd. from any liability which might arise from the giving of such authorization, it being my desire that my child be furnished with such medical or surgical services as soon as is reasonably possible.*

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_