



FEDERAL ACADEMY OF BALLET

Head Quarters: Bangunan FAB, No. 1-3 (3rd Floor), The Right Angle, Jalan 14/22, 46100 Petaling Jaya, Selangor Darul Ehsan, Malaysia.
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DECLARATION OF VACCINATION OF PARENTS

This declaration must be signed before your child will be allowed to attend class if they are unvaccinated.

Full name of Child: _____

Date of Birth: _____

I hereby declare that I am the parent of the above mentioned child and that I and my spouse have been fully vaccinated for more than 14 days after the final dose.

Name: _____

I/C Number: _____

- Please hand this form in to your teacher after it has been filled.
- Teachers please pass to admin office for safekeeping.