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| **ΑΙΤΗΣΗ – ΔΗΛΩΣΗ ΓΟΝΕΑ/ΚΗΔΕΜΟΝΑ** | | | | | | | | | | | | | | | | |  |
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| **ΠΡΟΣ ΤΟ 25Ο ΝΗΠΙΑΓΩΓΕΙΟ ΘΕΣΣΑΛΟΝΙΚΗΣ** | | | | | | | | | | | | | | | |
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|  | **Δηλώνω ότι επιθυμώ τη συμμετοχή του/των παιδιού/παιδιών μου στο Ολοήμερο Πρόγραμμα**  **Δηλώνω ότι επιθυμώ τη συμμετοχή του/των παιδιού/παιδιών μου στο τμήμα Πρωινής-Προαιρετικής Ζώνης ΝΑΙ / ΟΧΙ**  **Δηλώνω ότι επιθυμώ τη συμμετοχή του/των παιδιών μου στο Διευρυμένο Ολοήμερο ΝΑΙ/ΟΧΙ** | | | | | | | | | | | | | | | |  |
|  |  |  |  |  | |  |  |  |  |  | |  | *Τηλέφωνα επικοινωνίας:* | | |
|  | **Ονοματεπώνυμο πατέρα:** | | | | |  | | | | |  | | | | |
|  | **Ονοματεπώνυμο μητέρας:** | | | | |  | | | | |  | | | | |
|  |  |  |  |  | |  |  |  |  |  | |  |  | |  | |  |
|  | **Ονοματεπώνυμο μαθητή/τριας:** | | | | | …………………………………………….…ΝΗΠΙΟ / ΠΡΟΝΗΠΙΟ | | | | |  | | | |  | |  |
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|  | **Το/τα παιδί/-ιά μου κατά την αποχώρησή του/τους από το Σχολείο παραλαμβάνονται-συνοδεύονται από:** | | | | | | | | | | | | | | |
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|  |  |  |  |  | **Ο ΑΙΤΩΝ Η ΑΙΤΟΥΣΑ** | | | | | | | | |  |  | |  |
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