



## ENROLLMENT FORM:

### CONTRACT OF ENROLLMENT:

- ENROLLMENT FEE: R900-00
- INCLUDES: ALL STATIONARY, HOMEWORK FILE AND WORKSHEETS!
- ENROLLMENT FEE IS NON-REFUNDABLE.
- FEES MUST BE PAID STRICTLY IN ADVANCE AND BY THE 1<sup>ST</sup> OF EACH MONTH!
- FEES THAT ARE PAID LATE - R35-00 FEE WILL BE CHARGED PER DAY, THAT YOU PAY LATE!!
- SHOULD YOU NOT PAY BY THE 10<sup>TH</sup> OF EACH MONTH, ATTENDANCE WILL BE SUSPENDED, UNTIL OUR ACCOUNT IS UP TO DATE!
- A LATE PENALITY ADMINISTRATION FEE OF R200-00.
- NO CHEQUES ACCEPTED - STRICTLY CASH ONLY, OR PAID INTO THE BANK!
- DECEMBER FEE MUST BE PAID IN FULL.
- DECEMBER FEE IS NON REFUNDABLE!!
- WE ARE OPEN DURING THE SCHOOL HOLIDAYS.
- BUT ARE CLOSED ON PUBLIC HOLIDAYS.
- MONTHLY FEES MUST STILL BE PAID EVEN IF YOUR CHILD DOES NOT ATTEND IN THE HOLIDAYS.
- PLEASE DROP YOUR CHILD OFF BEFORE 8:00, IN TIME FOR BREAKFAST!
- THE SCHOOL SHALL NOT IN ANY MANNER WHATSOEVER BE LIABLE FOR ANY LOSS, INJURY AND OR DAMAGES HOWSOEVER SUSTAINED BY ANY CHILD AND OR PARENT ON THIS PROPERTY.
- THIS IS A ONE YEAR CONTRACT FOR GRADE R - NO NOTICE CAN BE GIVEN!
- YOUR CHILD IS EXPECTED TO ATTEND GRADE R FOR A ONE YEAR COURSE!
- IN EVENT THAT YOUR CHILD IS ABSENT DUE TO ILLNESS OR VACATION, NO REDUCTION IN SCHOOL FEES IS PERMITTED.
- FULL FEES ARE DUE FOR ANY GIVEN MONTH!

- PLEASE NOTE FAILURE TO PAY MONTHLY FEES - YOU WILL BE HANDED OVER AND LEGAL ACTION WILL BE TAKEN!!
- WE ARE AN INDEPENDENT EDUCARE CENTRE - THAT RELIES SOLELY OF FUNDING FROM THE PARENT BODY THROUGH SCHOOL FEES!
- BANKING DETAILS: N.T. White, Standard Bank, Selcourt, Springs, Cheque account, Account number: 025514555, please show proof of payment!

CHILD'S DETAILS:

NAME & SURNAME:

\_\_\_\_\_

DATE OF BIRTH:

\_\_\_\_\_

HOME LANGUAGE:

\_\_\_\_\_

HOME ADDRESS:

\_\_\_\_\_

GENDER: \_\_\_\_\_ FULL DAY OR HALF DAY:

\_\_\_\_\_

FATHER'S DETAILS:

NAME & SURNAME:

\_\_\_\_\_

I.D. NUMBER:

\_\_\_\_\_

HOME ADDRESS:

\_\_\_\_\_

POSTAL ADDRESS:

\_\_\_\_\_

HOME TEL. NO. \_\_\_\_\_ WORK:

\_\_\_\_\_

CELL: \_\_\_\_\_

OCCUPATION:

\_\_\_\_\_

EMPLOYER:

\_\_\_\_\_

E-MAIL ADDRESS:

\_\_\_\_\_

MOTHERS DETAILS:

NAME & SURNAME:

\_\_\_\_\_

I.D. NUMBER:

HOME ADDRESS:

POSTAL ADDRESS:

HOME TEL. NO. \_\_\_\_\_ WORK:

CELL: \_\_\_\_\_

OCCUPATION:

EMPLOYER:

E-MAIL ADDRESS:

GUARDIANS DETAILS:

NAME & SURNAME:

I.D. NUMBER:

HOME ADDRESS:

HOME TEL. NO. \_\_\_\_\_

WORK: \_\_\_\_\_

CELL: \_\_\_\_\_ RELATIONSHIP:

OCCUPATION: \_\_\_\_\_ EMPLOYER:

E-MAIL ADDRESS:

PERSON RESPONSIBLE FOR PAYING SCHOOL FEES:

NAME & SURNAME: \_\_\_\_\_

WORK TEL. NO. \_\_\_\_\_ CELL: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

DOES YOUR CHILD SUFFER FROM ANY ALLERGIES OR ILLNESSES?

PLEASE SPECIFY:

.....  
.....  
.....  
.....

WHO WILL DROP OFF YOUR CHILD AT SCHOOL?

NAME: .....

WHO WILL PICK UP YOUR CHILD FROM SCHOOL?

NAME: .....

TELEPHONE NUMBERS: .....

OTHER CHILDREN IN THE FAMILY, THEIR AGE & GENDER:

.....  
.....

PLEASE ATTACH THE FOLLOWING:

- PROOF OF RESIDENCE.
- COPY OF PARENTS/GAURDIANS I.D.
- CHILD'S BIRTH CERTIFICATE.

I ..... REQUEST THAT MY CHILD.....  
BE ENROLLED AT TODDLERS CORNER, I AGREE TO ABIDE WITH THE RULES AND  
REGULATIONS OF THE EDUCARE/AFTERCARE.

I UNDERSTAND, ACCEPT AND AGREE TO UPHOLD AND MEET ALL FINANCIAL AND MORAL  
TERMS AND OR CONDITIONS OF THIS AGREEMENT.

I AGREE TO GIVE 1 MONTH / 1 TERM/1 YEAR, NOTICE IF I WISH TO TAKE MY CHILD OUT OF  
THE SCHOOL:

PARENT SIGNATURE: .....

DATE OF ENROLLMENT: .....