



APPLICATION FOR ENROLMENT

Please fill in ALL ITEMS in block letters

RETURN THIS FORM WITH A CERTIFIED/ORIGINAL COPY OF YOUR CHILD'S BIRTH CERTIFICATE, CLINIC CARD, BOTH PARENTS ID COPIES, LATEST SCHOOL REPORT AND PROOF OF INCOME.

**INTERVIEW FEE WILL BE R50.00, PAYABLE ON THE DAY OF THE INTERVIEW.
PARTICULARS OF PUPIL**

Surname Date of Birth

First Names Age

Preferred Name Male/Female

To be admitted to Class/Kindergarten From (date).....

Previous/Current School* Present Class

Home Language Religion Nationality

Learning/Adjustment problems

.....

General Health

.....

Relevant medical history.....

.....

Allergies

.....

Current medication/treatment/therapy

.....

Doctor's name Tel No.....

N.B. For primary school: your child's most recent report must be attached to this application form.

DETAILS OF BROTHERS & SISTERS

Name Age Class School...

.....

.....

.....

.....

PARTICULARS OF PARENTS

FATHER

Surname
First Name
Marital status
(married/divorced/separated/single)
Home address
.....
.....
..... Code
Home Phone
E-mail Address
Cellphone
Postal address
.....
..... Code
Occupation/Profession
Business name
Business address
.....
..... Code
Business phone no
Business fax no

MOTHER

Surname
First Name
Marital status
(married/divorced/separated/single)
Home address
.....
.....
..... Code
Home Phone
E-mail Address:.....
Cellphone
Postal address
.....
..... Code
Occupation/Profession
Business name
Business address
.....
..... Code
Business phone no
Business fax no

Who is responsible for the payment of school Fees (Father/Mother)?

OTHER CONTACT PERSON:

Name of contact Relationship to pupil
Phone no. (school hours)

CORRESPONDENCE DETAILS

Address to which accounts, correspondence and reports should be sent:

Father / Mother / Other

Home / Postal / Other

AGREEMENT:

I, the undersigned, am aware that the acceptance of a place offered to a pupil will only be valid if made on the School's Acceptance of Place" form, and that such acceptance will render me liable for a non-refundable deposit of two (2) months school fees. I undertake to give not less than two (2) calendar months' notice in writing to the school before withdrawing the child from the school.

Name

Date

Signed

Capacity/Relationship to pupil