

Application Form

| Date | lesired enrollment date | |
|-----------------------------------------------------|-------------------------|--|
| | | |
| Name of child | | |
| Date of birth | Home language | |
| Address | | |
| | | |
| Cell mom | Cell dad | |
| Email mom | Email dad | |
| ID number mom | ID number dad | |
| Occupation mom | Occupation dad | |
| Work tel mom | Work tel dad | |
| Marital status mom | Marital status dad | |
| Who will be bringing our little friend to school? | | |
| Who will be fetching our little friend from school? | | |

Alternative / Emergency contact

Should there be an emergency and we're unable to reach you, who would you like us to contact?

Name/s Tel no/s

(011) 315 2324 | info@littlefriends.co.za | littlefriends.co.za | P.O. Box 10637, Vorna Valley, Midrand, 1686

Ages of children in the family

| 1. 2. | |
|-------|--|
| | |
| | |
| 3 4 | |
| | |
| | |
| 5 | |
| J | |
| | |

Nursery School Fees:

per child per month

Nursery School Fees & After School Fees:

per child per month

School Hours

Full Day 06h45 - 17h30

Half Day 06h45 - 13h00

Food & other allergies:

Health

General health:

Any deficiencies:

Any genetic defects:

General

| Toilet habits: | | |
|----------------------------------------|------|------|
| Speech: | | |
| Any habits that we should be aware of: | | |
| | | |

Hereby undertake:

- 1. To bring our child to the nursery school on a regular basis.
- 2. Fees are payable in advance before the 5th of each month. 10% interest will be charged on money received after the 5th.
- 3. I / We undertake to give a full month's written notice if the child is going to leave the school.
- 4. We give permission to the principal / substitute to seek the assistance of a doctor in an extreme emergency or the administration of anesthetic in a case where parents can not be reached. We as parents will be responsible for the expenses incurred.

| Name of Doctor: | Tel no: |
|-----------------|---------|
| | |
| Address: | |

- 5. To free the nursery school and / or any of its employees and / or any person that assists it in its tasks from any claim for losses and / or any costs resulting from any action whereby the child is involved.
- 6. To transfer my authority of parental discipline to the head and / or teachers of the nursery school.
- 7. I / We give permission for my / our child / children to go on supervised educational outings.
- I / We undertake to comply strictly with school hours. Nursery school: Supervision from 06h45 After school care: Supervision until 17h30
- 9. We take note that a fine is payable if we fetch our child after hours.
- 10. Do you give permission to the school to use images that may feature your child, in any marketing material? Yes / No

| Signed: | Date: |
|---------|-------|
| | |
| | |
| Signed: | Date: |

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