



38 Driedoring Street
 Mayberry Park
 1448
 Tel. 011 908 2846
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 Cell.082 569 9320

AFTER CARE ENROLMENT FORM: 2019

Name: _____ Surname: _____

Date of birth: _____ Any Allergies: _____

Chronic Illness: _____

Primary School Attending: _____ Grade: _____

Admission for: 12H00 - 18H00 R900.00 p.m. Registration fee (Yearly Fee) R400.00

Copy of Mothers ID: Copy of Fathers ID:

PARENTS/GUARDIANS (Relationship to learner)	Father/Guardian	Mother/Guardian
Name & Surname		
ID no:		
Occupation and Employer		
Physical address:		
Contact numbers: Work:		
Home:		
Cell:		
E-Mail address:		
Emergency Contact - Name & Surname:-		
Tel. No.	Cell. No	
Medical Aid Name and No:		
Doctor's Name:	Tel. No	
Persons authorized to pick up your child:		
Name & Surname:		
ID No:		
Registration no of car:		

***** PLEASE ENSURE THAT ALL YOUR DETAILS ARE KEPT UP TO DATE. ESPECIALLY CONTACT NUMBERS.
 SHOULD THERE BE A CHANGE, PLEASE NOTIFY THE OFFICE IMMEDIATELY. *****

CONDITIONS OF PAYMENT AND AGREEMENT

We (I) as parent ofagree to and accept the following:

- 1. That the monthly fee is payable on or before the first of each month including December.
- 2. That the full monthly fee is payable during school holidays and holidays taken by parents and children including December.
- 3. That the Nursery School will add an Administration fee of R200, 00 on late payments to your monthly account.
- 4. **In the event of my child leaving school I will give one calendar month notice (including payment for that month).**
- 5. **Notice given after September will include payment for October, November and December and will only be accepted after settlement of the October, November and December fees.**
- 6. Any collection fees to this affect will be for your own account.
- 7. **Domicilium and Notices :- The parties choose domicilium citandi et executandi (“domicilium”) for the purposes of the giving of any notice, the payment of any sum, the serving of any process and for any other the purpose arising from this agreement at their addresses as set out herein.**
- 8. **(NB) A penalty fee of R100 for each 30 minutes or part is on the spot payable when you fetch your child after 18h00**

PLEASE NOTE: - GARFIELD WILL BE CLOSING +- the 15th of DECEMBER EVERY YEAR AND REOPEN THE FIRST WORKING DAY OF THE NEW YEAR .

We also understand that we will be held liable and are responsible for the annual payment of R 10 800.00 or (R 900, 00 per month, excluding the initial R400 registration fee) as from 01 January to 31 December.

I, ID No:
(Parent Name and surname).

Have read, understand, agree and except the above conditions.

Signature: _____ Principal: _____ Date: _____
(Parent responsible for account)

Kindly note: that this is a legal document and you have accepted the terms and conditions of Garfield Nursery School. Welcome To Garfield Nursery School. May You And Your Child Enjoy Long And Happy Days With Us?

INDEMNITY

Please note the following:

Although here at Garfield Nursery School, we take the necessary precautions to ensure the safekeeping and good health of your child, the staff, teachers and owner of Garfield Nursery School are not liable for any losses, accidents, medical conditions, death, injuries or any other serious conditions that might avail on your child whilst being in our care.

I, ID Number:
(Full name and surname)

Parent/ guardian of:, have read the above, understand, agree and except the above conditions.

Signature: _____